| Fill in this information to identify your case: |   |                                      |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the :        |   |                                      |
| NORTHERN District of ILLINOIS (State)           |   |                                      |
| Case Number (If known):                         | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:            | Identify Yourself   |                            |   |
|--------------------|---|----------------------------|---|
|                    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your f          | full name   |                            |   |
| govern<br>identifi | he name that is on your<br>iment-issued picture<br>cation (for example,<br>river's license or | Mary First name Teresa     | First name                                    |
| passpo             |   | Middle name  Rzewuski      | Middle name                                   |
| identifi           | our picture cation to your meeting e trustee.   | Last name                  | Last name                                     |
|                    |   | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All otl         | her names you   |                            |   |
| have years         | used in the last 8  | First name                 | First name                                    |
|                    | e your married or<br>n names.   | Middle name                | Middle name                                   |
|                    |   | Last name                  | Last name                                     |
|                    |   | First name                 | First name                                    |
|                    |   | Middle name                | Middle name                                   |
|                    |   | Last name                  | Last name                                     |
| your \$            | the last 4 digits of<br>Social Security   | xxx - xx - <u>5918</u>     | XXX - XX                                      |
| Individ            | er or federal<br>lual Taxpayer<br>ication number  | OR                         | OR  |
| iueii(ii           | iodaon number   | 9xx - xx                   | <b>9</b> xx - xx                              |

Entered 08/31/16 16:50:44 Desc Main Filed 08/31/16 Case 16-28085 Doc 1 Page 2 of 59

Document Rzewuski Teresa Mary Debtor 1 Case Number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |
|----|--|---|---|--|--|
| 4. | Any business names<br>and Employer<br>Identification Numbers<br>(EIN) you have used in<br>the last 8 years | I have not used any business names or EINs.   | I have not used any business names or EINs.  Business name  |  |  |
|    | Include trade names and  | Business name   | Business name   |  |  |
|    | doing business as names  | EIN   | EIN   |  |  |
|    |  | EIN   | EIN   |  |  |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:   |  |  |
|    |  | Number Street Unit 2D   | Number Street   |  |  |
|    |  | Harwood Heights IL 60706 City State ZIP Code  | City State ZIP Code   |  |  |
|    |  | COOK  | County  |  |  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |  |  |
|    |  | Number Street   | Number Street   |  |  |
|    |  | P.O. Box  | P.O. Box  |  |  |
|    |  | City State ZIP Code   | City State ZIP Code   |  |  |
| 6. | Why you are choosing this district to file for   | Check one:  | Check one:  |  |  |
|    | bankruptcy.  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                            |  |  |
|    |  | have another reason. Explain. (See 28 U.S.C. § 1408   | I have another reason. Explain. (See 28 U.S.C. § 1408   |  |  |
|    |  |   |   |  |  |
|    |  |   |   |  |  |
|    |  |   |   |  |  |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main

Debtor 1 Mary Teresa Document Rzewuski Page 3 of 59

Case Number (if known)

| Pa  | Tell the Court About You                               | r Bankruptcy  | Case   |                                |   | _ |
|-----|--|---|--|--------------------------------|---|---|
| 7.  | The chapter of the<br>Bankruptcy Code you              |   |  |                                | equired by 11 U.S.C. § 342(b) for Individuals page 1 and check the appropriate box.                         |   |
|     | are choosing to file<br>under                          | ■ Chap  | ter 7  |                                |   |   |
|     | undo   | ☐ Chap  | ter 11   |                                |   |   |
|     |  | ☐ Chap  | ter 12   |                                |   |   |
|     |  | ☐ Chap  | ter 13   |                                |   |   |
| 8.  | How you will pay the fee                               | local yours subm with a linear Applical less a pay to | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.  I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).  I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. |                                |   |   |
| 9.  | Have you filed for bankruptcy within the last 8 years? | ■ No  | District None  | When                           | Case Number   |   |
|     |  |   |  |                                | MM / DD / YYYY  |   |
|     |  |   | District None  | When                           | Case Number   |   |
|     |  |   |  |                                | MM / DD / YYYY  |   |
|     |  |   | District   | When                           | Case Number   |   |
|     |  |   |  |                                | MM / DD / YYYY  |   |
| 10. | Are any bankruptcy cases pending or being              | ■ No  |  |                                |   |   |
|     | filed by a spouse who is<br>not filing this case with  | ☐ Yes.  | Debtor<br>District   |                                | Relationship to you<br>Case Number, if known  |   |
|     | you, or by a business parter, or by affiliate?         |   | Blothot  |                                | MM / DD / YYYY  |   |
|     |  |   |  |                                | Relationship to you   |   |
|     |  |   | District   | When                           | Case Number, if known   |   |
| 11. | Do you rent your residence?                            | □ No.<br>■ Yes.                                       | residence?  No. Go to line 1:  | 2.<br>ial Statement About an E | ent against you and do you want to stay in your  Eviction Judgment Against You (Form 101A) and file it with |   |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main

Document Page 4 of 59 Mary Teresa Rzewuski Debtor 1 Case Number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time Yes. Name and location of business business? A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnerhsip, or Number Street LLC. If you have more than one sole proprietorship, use a separate sheed and attach it to this petition. City Zip Code Check the appropriate box to describe your business: ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) ■ None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent Chapter 11 of the balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these **Bankruptcy Code and** documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. 14. Do you own or have any property that poses or is Yes. What is the hazard? alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed? \_ immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street

City

State

ZIP Code

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main

Debtor 1

Marv Teresa Document

Page 5 of 59

Rzewuski

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1 | out Debtor | 1 |
|----------------|------------|---|
|----------------|------------|---|

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefin | g about |
|--|---------|
| credit counseling because of:          |         |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required | to receive a | a briefing | about |
|-------------------|--------------|------------|-------|
| credit counseling | because of   | f:         |       |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main

Debtor 1 Mary Teresa Document Rzewuski Page 6 of 59

Case Number (if known)

| Part | 6 Answer These Questions   | for Reporting Purposes  |   |   |  |  |  |
|------|--|---|---|---|--|--|--|
|      | What kind of debts do you have?  | as "incurred by an individual   | consumer debts? Consumer debts are def<br>primarily for a personal, family, or household p                    |   |  |  |  |
|      |  | <ul> <li>No. Go to line 16b.</li> <li>Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.</li> </ul> |   |   |  |  |  |
|      |  |   |   |   |  |  |  |
|      |  | No. Go to line 16c. Yes. Go to line 17.   |   |   |  |  |  |
|      |  | _   | we that are not consumer debts or business d  | ebts.   |  |  |  |
|      | Are you filing under   |   | apter 7. Go to line 18.   |   |  |  |  |
|      | Chapter 7?   | <u> </u>  | er 7. Do you estimate that after any exempt pr  | roperty is excluded and                                   |  |  |  |
|      | Do you estimate that after<br>any exempt property is                           | _   | s are paid that funds will be available to distrib  | oute to unsecured creditors?                              |  |  |  |
|      | excluded and administrative expenses   | No.   |   |   |  |  |  |
|      | are paid that funds will be available for distribution to unsecured creditors? | <u></u> Yes.  |   |   |  |  |  |
|      | How many creditors do  | 1-49  | 1,000-5,000   | 25,001-50,000   |  |  |  |
|      | you estimate that you owe?   | ☐ 50-99   | 5,001-10,000  | 50,001-100,000  |  |  |  |
|      | owe:   | ☐ 100-199<br>☐ 200-999  | ☐ 10,001-25,000   | ☐ More than 100,000                                       |  |  |  |
|      | How much do you  | \$0-\$50,000  | \$1,000,001-\$10 million  | □\$500,000,001-\$1 billion                                |  |  |  |
|      | estimate your assets to be worth?  | \$50,001-\$100,000  | \$10,000,001-\$50 million   | \$1,000,000,001-\$10 billion                              |  |  |  |
|      | be worth:  | ☐ \$100,001-\$500,000<br>☐ \$500,001-\$1 million  | ☐ \$50,000,001-\$100 million<br>☐ \$100,000,001-\$500 million   | ☐\$10,000,000,001-\$50 billion<br>☐More than \$50 billion |  |  |  |
|      | How much do you  | □ \$0-\$50,000  | □ \$1,000,001-\$10 million  | □\$500,000,001-\$1 billion                                |  |  |  |
|      | estimate your liabilities  | \$50,001-\$100,000  | \$10,000,001-\$50 million   | □\$1,000,000,001-\$10 billion                             |  |  |  |
|      | to be?   | \$100,001-\$500,000   | \$50,000,001-\$100 million  | \$10,000,000,001-\$50 billion                             |  |  |  |
|      |  | ☐ \$500,001-\$1 million   | \$100,000,001-\$500 million   | ☐ More than \$50 billion                                  |  |  |  |
| ırt  | 7. Sign Below  |   |   |   |  |  |  |
| r y  | ou .   | I have examined this petition, and correct.   | I declare under penalty of perjury that the infor   | rmation provided is true and                              |  |  |  |
|      |  | · ·   | ter 7, I am aware that I may proceed, if eligible<br>nderstand the relief available under each chap           | *   |  |  |  |
|      |  |   | did not pay or agree to pay someone who is nd read the notice required by 11 U.S.C. § 342(                    | , ,   |  |  |  |
|      |  | I request relief in accordance with   | the chapter of title 11, United States Code, spe  | ecified in this petition.                                 |  |  |  |
|      |  |   | nent, concealing property, or obtaining money<br>in fines up to \$250,000, or imprisonment for up<br>if 3571. |   |  |  |  |
|      |  | /s/ Mary Teresa Rzewo   |   | ture of Debtor 2  |  |  |  |
|      |  | Signature of Debtor 1   | Signat  | uig of Deblof 2   |  |  |  |
|      |  | Executed on08/29/2016   |   | ted on  |  |  |  |
|      |  | MM / DD /   | YYYY  | MM / DD / YYYY  |  |  |  |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 7 of 59

| Debtor 1   | Mary                                    | Teresa   | Rzewuski   | Case Number   | (if known)  |                           |
|--|---|--|--|---|---|---------------------------|
|  | First Name                              | Middle Name  | Last Name  |   |   |                           |
| •  | ır attorney, if you are<br>ented by one | proceed under Chapte<br>each chapter for whic<br>11 U.S.C. § 342(b) ar | er 7, 11, 12, or 13 of title 11, U<br>th the person is eligible. I also<br>nd, in a case in which § 707(b) | n, declare that I have informed t<br>nited States Code, and have ex<br>certify that I have delivered to tl<br>(4)(D) applies, certify that I have | plained the relief available debtor(s) the notice | able under<br>required by |
| •  | re not represented                      | the information in the   | schedules filed with the petitio   | n is incorrect.   |   |                           |
| by an attorney, you do not need to file this page. |   | 🗶 /s/ Wylie W Mok  |  | Date  | Date: 08/31/2016                                  |                           |
|  |   | Signature of Atto  | orney for Debtor   |   | MM / DD / YYYY                                    |                           |
|  |   | Wylie W  | Mok  |   |   |                           |
|  |   | Printed name   |  |   |   |                           |
|  |   | Geraci La  | aw L.L.C.  |   |   |                           |
|  |   | Firm name  |  |   |   |                           |
|  |   |  | nroe St., #3400  |   |   |                           |
|  |   | Number Stree   | et   |   |   |                           |
|  |   | Chicago  |  | IL  | 60603   |                           |
|  |   | City   |  | State   | ZIP Code  |                           |
|  |   | Contact Phone  | 312-332-1800   | Email add   | <sub>dress</sub> ndil@gerad                       | cilaw.com                 |
|  |   | 6293407  |  | IL  |   |                           |

State

Bar number

| Debtor 1             | Mary                 | Teresa                            | Rzewuski         |
|----------------------|----------------------|-----------------------------------|------------------|
|                      | First Name           | Middle Name                       | Last Name        |
| Debtor 2             |                      |                                   |                  |
| Spouse, if filing)   | First Name           | Middle Name                       | Last Name        |
| Jnited States        | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS (State) |
| ise Number<br>known) |                      |                                   |                  |

# Check if this is an amended filing

### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Pa | Summarize Your Assets  |                                   |
|----|--|-----------------------------------|
|    |  | Your assets Value of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$ 0                              |
|    | 1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>  | \$ 14,530                         |
|    | 1c. Copy line 63, Total of all property on Schedule A/B  | \$ 14,530                         |
|    |  |                                   |
| Pa | Summarize Your Liabilities   |                                   |
|    |  | Your liabilities Amount you owe   |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$10,900                          |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$0                               |
|    | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$54,234                          |
|    |  |                                   |
| Pa | Summarize Your Liabilities   |                                   |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$3,485.34                        |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$3,061.08                        |
|    |  |                                   |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main

Page 9 of 59 Document Debtor 1 Mary Teresa Rzewuski Case Number (if known) \_ First Name Middle Name Last Name **EntriesDescription AssetsAmount LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$ 1,923.34 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00 priority claims. (Copy line 6g.) \$ 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$ 0.00

9g. Total. Add lines 9a through 9f.

|                     |                       | 2909E Doc 1                           |   | Entered 08/31/16 16:  | 50:44 De            | sc Main  |
|---------------------|-----------------------|---------------------------------------|---|---|---------------------|--|
| Fill in this in     | formation to ide      | ntify your case and this fi           | ling:   | 0 of 59   |                     |  |
| Debtor 1            | Mary                  | Teresa                                | Rzewuski  |   |                     |  |
| Debtor 2            | First Name            | Middle Name                           | Last Name   |   |                     |  |
| (Spouse, if filing) | First Name            | Middle Name                           | Last Name   |   |                     |  |
| United States       | Bankruptcy Court for  | or the : <u>NORTHERN</u> Distr        |   |   |                     |  |
| Case Number         | -                     |                                       | (State)   |   |                     | Check if this is an                                  |
| (If known)          |                       |                                       |   |   |                     | amended filing                                       |
|                     | <u>orm 106A</u>       |                                       |   |   |                     |  |
|                     | e A/B: Pr             |                                       |   | -   |                     | 12/15  |
| _                   |                       |                                       | · · · · · · · · · · · · · · · · · · ·                             | fits in more than one category, list<br>arried people are filing together, bo |                     |  |
| esponsible for      | supplying corre       | ct information. If more sp            | ace is needed, attach a separa                                    | te sheet to this form. On the top of  |                     |  |
|                     |                       | e number (if known). Ans              |   | !   |                     |  |
| raiti               |                       |                                       | Other Real Esate You Own or Ha<br>n any residence, building, land |   |                     |  |
| No.                 | vii oi ilave aliy le  | gai or equitable interest in          | n any residence, building, land                                   | , or similar property:  |                     |  |
| Yes.                | Describe              |                                       |   |   |                     |  |
|                     | _                     | -                                     | your entries fro Part 1, includi                                  | ng any entries for pages  | >                   | \$0.00   |
| _                   |                       |                                       |   |   |                     | ψ0.00  |
| Part 2:             | Describe Your Vel     | hicles                                |   |   |                     |  |
| =                   |                       | · · · · · · · · · · · · · · · · · · · |   | e registered or not? Include any vehi   |                     |  |
| -                   |                       | -                                     | •   | ecutory Contracts and Unexpired Le  | ases.               |  |
| No.                 | s, trucks, tractors   | s, sport utility vehicles, m          | otorcycles  |   |                     |  |
| Yes.                | Describe              | Touris                                |   |   |                     |  |
| V                   | Make:                 | Toyota                                | Who has an interest in the  |   |                     | claims or exemptions. Put ured claims on Schedule D: |
| N                   | Model:                | RAV4                                  | Debtor 1 only  Debtor 2 only                                      |   | · ·                 | laims Secured by Property                            |
| Y                   | ear:                  | 2012                                  | Debtor 1 and Debtor 2 on  | lv  | urrent value of the | Current value of the                                 |
| A                   | Approximate Milea     | age: 23,500                           | At least one of the debtors                                       |   | ntire property?     | portion you own?                                     |
| C                   | Other information:    |                                       |   | \$_   | 13,230              | .00 \$ 13,230.00                                     |
|                     |                       |                                       | instructions)   | unity property (see   |                     |  |
|                     |                       |                                       |   |   |                     |  |
| 04 Watercraft       | t aircraft motor      | homes ATVs and other re               | ecreational vehicles, other veh                                   | icles, and accessories  |                     |  |
| Examples:           |                       |                                       | g vessels, snowmobiles, motorcycle                                |   |                     |  |
| No.                 | Describe              |                                       |   |   |                     |  |
|                     |                       | oortion you own for all of            | your entries fro Part 2, includir                                 | ng any entries for pages  |                     |  |
| you have at         | ttached for Part 2    | 2. Write that number here             |   | >   |                     | \$ 13,230.00   |
| Part 3:             | Describe Your Per     | rsonal and Household Items            | <b>:</b>  |   |                     |  |
| Do you own o        | r have any legal      | or equitable interest in an           | v of the following items?   |   |                     | Current value of the                                 |
| 20 you oui o        | . navo any logan      | or oquitable interest in an           | y or ano ronowing items.  |   |                     | portion you own?                                     |
|                     |                       |                                       |   |   |                     | Do not deduct secured claims<br>or exemptions        |
|                     | d goods and furn      | =                                     | ware  |   |                     |  |
| Examples:           | iviajui appliances, f | urniture, linens, china, kitchen      | wale  |   |                     |  |
| Yes.                | Describe              | Firmitian Process                     | anne Arbie O district   |   | 222                 |  |
|                     |                       | rurniture, linens, small applia       | ances, table & chairs, bedroom set                                |   | \$600               | \$ 600.00  |

Case 16-28085 Doc 1 Mary Debtor 1

Filed 08/31/16

Document

Last Name Entered 08/31/16 16:50:44 Page 11 of 9 umber (if known) Desc Main First Name Middle Name

|           | Electronics  |  |   |
|-----------|--|--|---|
|           |  | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music  |   |
|           |  | s including cell phones, cameras, media players, games   |   |
|           | No.  |  |   |
|           | Yes. Describe  |  |   |
|           |  | Flat screen TV, computer, printer, music collection, cell phone \$250  | \$ 250.00   |
|           | Callantibles of color  |  | \$250.00  |
| 08.       | Collectibles of value  | rises; paintings, prints, or other artwork; books, pictures, or other art objects;   |   |
|           |  | ines; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles  |   |
|           | No.  | concentration of the concentra |   |
|           |  |  | 1   |
|           | Yes. Describe  |  | 0.00  |
|           | F  | Labelia.   | \$0.00  |
| 09.       | Equipment for sports and   | hic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes  |   |
|           | and kayaks; carpentry tools;   |  |   |
|           | No.  | THE OWN HOLD THE   |   |
|           |  |  | 1   |
|           | Yes. Describe  |  | 0.00  |
| 40        | F:   |  | \$0.00  |
| 10.       | Firearms   | laura appropriation, and related agricoment  |   |
|           |  | iguns, ammunition, and related equipment   |   |
|           | No.  |  |   |
|           | Yes. Describe  |  |   |
|           |  |  | \$ <u>0.0</u> 0   |
| 11.       | Clothes  |  |   |
|           | Examples: Everyday clothes,  | furs, leather coats, designer wear, shoes, accessories   |   |
|           | No.  |  |   |
|           | Yes. Describe  |  |   |
|           |  | Normal Clothing, Shoes, Acessories \$100   |   |
|           |  |  | \$ <u>100.0</u> 0   |
| 12.       | Jewelry  |  |   |
|           |  | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,   |   |
|           | gold, silver   |  |   |
|           | ∐No.   |  |   |
|           | Yes. Describe  |  |   |
|           |  | Costume and old jewelry \$100  |   |
|           |  |  | \$ <u>100.0</u> 0   |
| 13.       | Non-farm animals   |  |   |
|           | Examples: Dogs, cats, birds,   |  |   |
|           | No.  | 10/365   |   |
|           | _  | in in its season in the interest of the intere |   |
|           | Yes. Describe  |  |   |
|           | Yes. Describe  | in its in the second se | \$ <u>0.0</u> 0   |
| 14.       | _  | ousehold items you did not already list, including any health aids you did not list  | \$0.00  |
| 14.       | _  |  | \$0.00  |
| 14.       | Any other personal and h   |  | \$0.00  |
| 14.       | Any other personal and h   |  | \$ <u>0.00</u>  |
|           | Any other personal and h No. Yes. Describe   | ousehold items you did not already list, including any health aids you did not list  | \$0.00  |
| 15.       | Any other personal and h No. Yes. Describe  Add the dollar value of all  | ousehold items you did not already list, including any health aids you did not list  of your entries from Part 3, including any entries for pages you have attached  |   |
| 15.       | Any other personal and h No. Yes. Describe  Add the dollar value of all  | ousehold items you did not already list, including any health aids you did not list  | \$0.00  |
| 15.       | Any other personal and h No. Yes. Describe  Add the dollar value of all for Part 3. Write that num   | ousehold items you did not already list, including any health aids you did not list  of your entries from Part 3, including any entries for pages you have attached ber here   | \$0.00  |
| 15.       | Any other personal and h No. Yes. Describe  Add the dollar value of all for Part 3. Write that num   | ousehold items you did not already list, including any health aids you did not list  of your entries from Part 3, including any entries for pages you have attached ber here   | \$0.00  |
| 15.       | Any other personal and h No. Yes. Describe  Add the dollar value of all for Part 3. Write that num  Describe Your Fi   | ousehold items you did not already list, including any health aids you did not list  of your entries from Part 3, including any entries for pages you have attached ber here   | \$0.00  |
| 15.       | Any other personal and h No. Yes. Describe  Add the dollar value of all for Part 3. Write that num  Describe Your Fi   | ousehold items you did not already list, including any health aids you did not list  of your entries from Part 3, including any entries for pages you have attached ber here   | \$\$1,050.00  |
| 15.       | Any other personal and h No. Yes. Describe  Add the dollar value of all for Part 3. Write that num  Describe Your Fi   | ousehold items you did not already list, including any health aids you did not list  of your entries from Part 3, including any entries for pages you have attached ber here   | \$  |
| 15.       | Any other personal and h No. Yes. Describe  Add the dollar value of all for Part 3. Write that num  Describe Your Fi   | ousehold items you did not already list, including any health aids you did not list  of your entries from Part 3, including any entries for pages you have attached ber here   | \$0.00<br>\$1,050.00<br>Current value of the<br>portion you own?                      |
| 15.<br>Do | Any other personal and h No. Yes. Describe  Add the dollar value of all for Part 3. Write that num  Describe Your Fi   | ousehold items you did not already list, including any health aids you did not list  of your entries from Part 3, including any entries for pages you have attached ber here   | \$0.00 \$1,050.00  Current value of the portion you own? Do not deduct secured claims |
| 15.<br>Do | Any other personal and h No. Yes. Describe  Add the dollar value of all for Part 3. Write that num  Describe Your Fi you own or have any lega  Cash                              | ousehold items you did not already list, including any health aids you did not list  of your entries from Part 3, including any entries for pages you have attached ber here   | \$0.00 \$1,050.00  Current value of the portion you own? Do not deduct secured claims |
| 15.<br>Do | Any other personal and h No. Yes. Describe  Add the dollar value of all for Part 3. Write that num  Describe Your Fi you own or have any lega  Cash                              | ousehold items you did not already list, including any health aids you did not list  of your entries from Part 3, including any entries for pages you have attached per here   | \$0.00 \$1,050.00  Current value of the portion you own? Do not deduct secured claims |
| 15.<br>Do | Any other personal and h No. Yes. Describe  Add the dollar value of all for Part 3. Write that num  Describe Your Fi you own or have any lega  Cash  Examples: Money you have in | ousehold items you did not already list, including any health aids you did not list  of your entries from Part 3, including any entries for pages you have attached per here   | \$0.00 \$1,050.00  Current value of the portion you own? Do not deduct secured claims |

Debtor 1

Mary

Case 16-28085

Filed 08/31/16

Document

Last Name

Filed 08/31/16 Doc 1

Entered 08/31/16 16:50:44 Page 12 of 59 umber (if known)

Desc Main

First Name Middle Name

| 17. | Deposits o   | f money             |                                   |                     |  |          |                |
|-----|--------------|---------------------|-----------------------------------|---------------------|--|----------|----------------|
|     | Examples:    | Checking, savings   | s, or other financial accounts; c | ertificates of de   | posit; shares in credit unions, brokerage houses,            |          |                |
|     |              |                     | If you have multiple accounts v   |                     |  |          |                |
|     | No.          |                     | •                                 |                     |  |          |                |
|     | <b>=</b>     | Dagariba            | Account Type:                     | Inct                | tution name:   |          |                |
|     | Yes.         | Describe            | Account Type:                     | IIISt               | tution name:   |          | 50.00          |
|     |              |                     | Checking Account                  |                     | Bank of America  |          | 50.00          |
|     |              |                     | Checking Account                  |                     | Parkway Bank   | \$       | 200.00         |
|     |              |                     |                                   |                     |  |          | 250.00         |
| 40  | Danda mu     | tual funda au       | audalialu tuadad ataalea          |                     |  | <b>a</b> | 230.00         |
| 18. |              | · · · · ·           | oublicly traded stocks            | <b>5</b>            |  |          |                |
|     |              | Bona tunas, inves   | stment accounts with brokerage    | tirms, money        | market accounts  |          |                |
|     | No.          |                     |                                   |                     |  |          |                |
|     | Yes.         | Describe            | Institution or issuer name        | :                   |  |          |                |
|     | _            |                     |                                   |                     |  | \$       | 0.00           |
| 19  | Non-nublic   | ly traded stock     | and interests in incornor         | ated and uni        | ncorporated businesses, including an interest in             | *        |                |
|     |              | ny traduction       | t una intereste in meer per       | atou ana am         | moorporated bacineouse, moraling an interest in              |          |                |
|     | No.          |                     |                                   |                     |  |          |                |
|     | Yes.         | Describe            | Name of Entity and Perce          | ent of Owners       | hip:   |          |                |
|     |              |                     |                                   |                     |  | \$       | 0.00           |
| 20. | Governme     | nt and corpora      | te bonds and other negoti         | able and nor        | -negotiable instruments                                      |          |                |
|     |              | =                   | de personal checks, cashiers' d   |                     | _  |          |                |
|     | •            |                     | are those you cannot transfer to  |                     |  |          |                |
|     | No.          |                     |                                   |                     | ·3····3 · · · · · · · · · · · · · · · ·                      |          |                |
|     | =            |                     | 1                                 |                     |  |          |                |
|     | Yes.         | Describe            | Issuer name:                      |                     |  |          |                |
|     |              |                     |                                   |                     |  | \$       | <u> </u>       |
| 21. | Retirement   | t or pension ac     | counts                            |                     |  |          |                |
|     | Examples:    | Interests in IRA, E | RISA, Keogh, 401(k), 403(b), 1    | thrift savings ac   | counts, or other pension or profit-sharing plans             |          |                |
|     | No.          |                     |                                   |                     |  |          |                |
|     | <b>=</b>     | December            | Type of account and lasti         | tution name:        |  |          |                |
|     | Yes.         | Describe            | Type of account and Insti         | lulion name.        | T  |          |                |
|     |              |                     | Pension plan                      |                     | Through former employer                                      |          | <u>Unknown</u> |
|     |              |                     |                                   |                     |  |          | 0.00           |
| 22. | Security de  | eposits and pre     | enavments                         |                     |  | ·        |                |
|     | =            | -                   |                                   | u may continu       | e service or use from a company                              |          |                |
|     |              |                     |                                   | -                   | gas, water), telecommunications                              |          |                |
|     |              | Agreements with     | landiords, prepaid rent, public t | itilities (electric | gas, water), telecommunications                              |          |                |
|     | No.          |                     |                                   |                     |  |          |                |
|     | Yes.         | Describe            | Institution name or individ       | lual:               |  |          |                |
|     |              |                     |                                   |                     |  | \$       | 0.00           |
| 23. | Annuities (  | A contract for      | a periodic payment of mo          | nev to vou, e       | ither for life or for a number of years)                     |          |                |
|     | No.          |                     |                                   | ., , .              | , , , , , , , , , , , , , , , , , , ,                        |          |                |
|     | 110.         |                     |                                   |                     |  |          |                |
|     | Yes.         | Describe            | Issuer name and descript          | ion:                |  |          |                |
|     |              |                     |                                   |                     |  | \$       | 0.00           |
| 24. | Interests in | n an education      | IRA, in an account in a qu        | alified ABLE        | program, or under a qualified state tuition program.         |          |                |
|     | 26 U.S.C. §  | § 530(b)(1), 529A   | A(b), and 529(b)(1).              |                     |  |          |                |
|     | No.          |                     |                                   |                     |  |          |                |
|     | =            |                     |                                   |                     |  |          |                |
|     | Yes.         | Describe            | Institution name and desc         | ription. Sepa       | rately file the records of any interests.11 U.S.C. § 521(c): |          |                |
|     |              |                     |                                   |                     |  | \$       | <u> </u>       |
| 25. | Trusts, equ  | uitable or future   | e interests in property (oth      | ner than anyt       | hing listed in line 1), and rights or powers                 |          |                |
|     | No.          |                     |                                   |                     |  |          |                |
|     |              |                     |                                   |                     |  |          |                |
|     | Yes.         | Describe            |                                   |                     |  |          |                |
|     |              |                     |                                   |                     |  |          | <u> </u>       |
| 26. | Patents, co  | pyrights, trade     | emarks, trade secrets, and        | other intelle       | ctual property   |          |                |
|     | Examples:    | Internet domain n   | ames, websites, proceeds from     | royalties and l     | icensing agreements  |          |                |
|     | No.          |                     |                                   | •                   |  |          |                |
|     | =            |                     |                                   |                     |  |          |                |
|     | Yes.         | Describe            |                                   |                     |  |          |                |
|     |              |                     |                                   |                     |  |          | 0.00           |
| 27. | Licenses, 1  | franchises, and     | other general intangibles         | •                   |  |          |                |
|     |              |                     |                                   |                     | ldings, liquor licenses, professional licenses               |          |                |
|     | No.          | - 1                 | •                                 |                     | •  |          |                |
|     | <b>=</b>     | <b>.</b>            |                                   |                     |  |          |                |
|     | Yes.         | Describe            |                                   |                     |  |          |                |
|     |              |                     |                                   |                     |  | \$       | 0.00           |

Schedule A/B: Property

Debtor 1

Mary

Case 16-28085 Doc 1 Filed 08/31/16

Document

Last Name

Desc Main

First Name Middle Name

Entered 08/31/16 16:50:44 Page 13 of 59 umber (if known)

| Мо  | ney or prope  | erty owed to you   | 1?   | Current value of the portion you own? Do not deduct secured claims or exemptions |
|-----|---------------|--------------------|--|--|
| 28. | Tax refunds   | s owed to you      |  |  |
|     | No.           |                    |  |  |
|     | Yes.          | Describe           |  | \$ 0.00  |
| 29. | Family sup    | port               |  | <u> </u>   |
|     | Examples: F   | Past due or lump s | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement   |  |
|     | Yes.          | Describe           |  |  |
|     |               |                    |  | \$ <u>0.0</u> 0  |
| 30. | Examples: l   |                    | wes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, d loans you made to someone else |  |
|     | Yes.          | Describe           |  | \$0.00   |
| 31. |               | nsurance polic     |  |  |
|     | No.           | •                  | r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  Company Name & Beneficiary:                  |  |
|     | Yes.          | Describe           |  |  |
| 32  | ∆nv interes   | t in property th   | at is due you from someone who has died  | \$0.00   |
| J   | If you are th | e beneficiary of a | iving trust, expect proceeds from a life insurance policy, or are currently entitled to receive  |  |
|     | property bed  | cause someone ha   | is died.   |  |
|     | Yes.          | Describe           |  | s 0.00   |
| 33. | _             | -                  | s, whether or not you have filed a lawsuit or made a demand for payment  | <u> </u>   |
|     | Examples: A   | Accidents, employr | nent disputes, insurance claims, or rights to sue  |  |
|     | Yes.          | Describe           |  |  |
|     | 041           |                    |  | \$0.00   |
| 34. | No.           | ngent and unit     | uidated claims of every nature, including counterclaims of the debtor and rights   |  |
|     | Yes.          | Describe           |  |  |
| 35  | Any financi   | al assets you d    | id not already list  | \$0.00   |
| 00. | No.           | ai accoto you a    | ia not unoddy not  |  |
|     | Yes.          | Describe           |  | \$ 0.00  |
|     |               |                    |  | *  |
|     |               |                    | of your entries from Part 4, including any entries for pages you have attached or here   | \$250.00   |
|     | IOI Fait 4. W | rite that numbe    | nere   |  |
| P   | art 5: D      | escribe Any Bus    | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1.   |  |
| 37. |               | n or have any le   | gal or equitable interest in any business-related property?  |  |
|     | No.           |                    |  |  |
|     |               |                    |  | Current value of the   |
|     |               |                    |  | portion you own?  Do not deduct secured claims or exemptions                     |
| 38. |               | eceivable or co    | mmissions you already earned   |  |
|     | No.           | Describe           |  |  |
|     |               |                    |  | \$0.00   |

Case 16-28085 Doc 1 Mary Debtor 1

Filed 08/31/16 Document Entered 08/31/16 16:50:44 Page 14 of 9 gumber (if known) Desc Main First Name Middle Name

| 39.                             | . Office equipment, furnishings, and supplies  |  |
|---------------------------------|--|--|
|                                 | Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  No.  |  |
|                                 | Yes. Describe  | \$ 0.00                                      |
| 40.                             | . Machinery, fixtures, equipment, supplies you use in business, and tools of your trade  |  |
|                                 | No.  Yes. Describe   |  |
|                                 | Tes. Describe  | \$0.00                                       |
| 41.                             | . Inventory  |  |
|                                 | No.  Yes. Describe   |  |
|                                 |  | \$0.00                                       |
| 42.                             | No. Name of Entity and Percent of Ownership:   |  |
|                                 | Yes. Describe  |  |
| 12                              | . Customer lists, mailing lists, or other compilations   | \$0.00                                       |
| 43.                             | No.  |  |
|                                 | Yes. Describe  |  |
| 44.                             | . Any business-related property you did not already list   | \$ <u>0.0</u> 0                              |
|                                 | No.  |  |
|                                 | Yes. Describe  | \$ 0.00                                      |
|                                 |  | \$0.0  |
|                                 | Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached   | \$ 0.00                                      |
|                                 | for Part 5. Write that number here>  | \$ 0.00                                      |
|                                 |  |  |
|                                 | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.   |  |
|                                 | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  |  |
|                                 | If you own or have an interest in farmland, list it in Part 1.   |  |
|                                 | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  | \$ 0.00                                      |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.   | \$0.00                                       |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  | \$ <u>0.0</u> 0                              |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  | \$0.00                                       |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  | \$\$\$\$                                     |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.   | <u>,                                    </u> |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested   | \$ <u>0.0</u> 0                              |
| 46.<br>47.                      | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe   | <u>,                                    </u> |
| 46.<br>47.                      | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  | \$ <u>0.0</u> 0                              |
| 46.<br>47.                      | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  | \$\$<br>\$0.00                               |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.   | \$ <u>0.0</u> 0                              |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed  No.   | \$\$<br>\$0.00                               |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed  | \$\$<br>\$0.00                               |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed  No.   | \$\$<br>\$0.00<br>\$0                        |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed  No.  Yes. Describe  Any farm- and commercial fishing-related property you did not already list  No.   | \$\$<br>\$0.00<br>\$0                        |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish No. Yes. Describe  Crops—either growing or harvested  No. Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No. Yes. Describe  Farm and fishing supplies, chemicals, and feed  No. Yes. Describe  Farm and fishing supplies, chemicals, and feed  No. Yes. Describe  Any farm- and commercial fishing-related property you did not already list | \$\$<br>\$0.00<br>\$0                        |
| 46.<br>47.<br>48.<br>49.        | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed  No.  Yes. Describe  Any farm- and commercial fishing-related property you did not already list  No.  Yes. Describe  | \$\$<br>\$0.00<br>\$\$                       |
| 46.<br>47.<br>48.<br>49.<br>50. | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed  No.  Yes. Describe  Any farm- and commercial fishing-related property you did not already list  No.   | \$\$<br>\$0.00<br>\$\$                       |

Debtor 1

Case 16-28085 Mary

Doc 1

Filed 08/31/16 Entered 08/31/16 16:50:44

Document Page 15 of 59 umber (if known)

Desc Main

First Name

| Part 7:              | Describe All Property You Own or Have an Interest in That You Did Not List Above | ve           |                 |
|----------------------|--|--------------|-----------------|
| _                    |  |              | \$ <u>0.0</u> 0 |
| 54. Add the          | dollar value of all of your entries from Part 7. Write that number here          | >            | \$0.00          |
| Part 8:              | List the Totals of Each Part of this Form  |              |                 |
| 55. Part 1: T        | otal real estate, line 2   |              | \$ 0.00         |
| 56. Part 2: T        | otal vehicles, line 5  | \$ 13,230.00 |                 |
| 57. Part 3: T        | otal personal and household items, line 15                                       | \$ 1,050.00  |                 |
| 58. Part 4: T        | otal financial assets, line 36   | \$ 250.00    |                 |
| 59. <b>Part 5: T</b> | otal business-related property, line 45  | \$ 0.00      |                 |
| 60. Part 6: T        | otal farm- and fishing-related property, line 52                                 | \$ 0.00      |                 |
| 61. Part 7: T        | otal other property not listed, line 54  | \$ 0.00      |                 |
| 62. Total per        | sonal property. Add lines 56 through 61  | \$ 14,530.00 | \$ 14,530.00    |
| 63. Total of a       | all property on Schedule A/B. Add line 55 + line 62                              |              | \$14,530.00     |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main

| Fill in this in     | nformation to ident  | ify your case:                      |                  |
|---------------------|----------------------|-------------------------------------|------------------|
| Debtor 1            | Mary                 | Teresa                              | Rzewuski         |
|                     | First Name           | Middle Name                         | Last Name        |
| Debtor 2            | ·                    |                                     |                  |
| (Spouse, if filing) | First Name           | Middle Name                         | Last Name        |
| United States       | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS (State) |
| Case Number         | r                    |                                     |                  |
| (If known)          |                      |                                     |                  |

## Official Form 106C

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|   | fy the Property You Claim as Exempt   |                                      |   |                                      |  |  |  |  |
|---|---|--------------------------------------|---|--------------------------------------|--|--|--|--|
| 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. |   |                                      |   |                                      |  |  |  |  |
| _   | You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3) |                                      |   |                                      |  |  |  |  |
| You are clair   | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)                          |                                      |   |                                      |  |  |  |  |
|   |   |                                      |   |                                      |  |  |  |  |
| 2. For any propert  | y you list on <i>Schedule A/B</i> that yo   | u claim as exempt, fill in t         | the information below.  |                                      |  |  |  |  |
|   | on of the property and line on hat lists this property                              | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption   |  |  |  |  |
|   |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                      |  |  |  |  |
| Brief description:  | 2012 Toyota RAV4 with over 23,500 miles   | \$ 13,230                            | \$ _ 2,400  | 735 ILCS 5/12-1001(c) - \$2,400.00   |  |  |  |  |
| Line from Schedule A/B:   | 03  |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |  |  |
| Brief<br>description:   | Furniture, linens, small appliances, table & chairs, bedroom set                    | \$_600                               | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$600.00     |  |  |  |  |
| Line from Schedule A/B:   | 06  |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |  |  |
| Brief<br>description:   | Flat screen TV, computer, printer, music collection, cell phone                     | \$_250                               | <u></u> \$  | 735 ILCS 5/12-1001(b) - \$250.00     |  |  |  |  |
| Line from Schedule A/B:   | <u>07</u>   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |  |  |
| Brief<br>description:   | Normal Clothing, Shoes,<br>Acessories   | \$ <u>100</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(a),(e) - \$100.00 |  |  |  |  |
| Line from Schedule A/B:   | 11  |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |  |  |
|   |   |                                      |   |                                      |  |  |  |  |
| Official Form 106C  | Record # 715680   | Schedule C: T                        | he Property You Claim as Exempt                                 | Page 1 of 2                          |  |  |  |  |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main

Debtor 1 Mary Teresa Document Page 17 of 59 Case Number (if known)

Last Name

Middle Name

**Additional Page** Part 2: Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B Brief Costume and old jewelry 735 ILCS 5/12-1001(a),(e) - \$100.00 description: \$ 100 Line from 100% of fair market value, up to 12 Schedule A/B: any applicable statutory limit 735 ILCS 5/12-1001(b) - \$50.00 Brief Checking Account, Bank of \$ 50 America, 50.00 description: 100% of fair market value, up to Line from Schedule A/B: any applicable statutory limit Brief Checking Account, Parkway Bank, 735 ILCS 5/12-1001(b) - \$200.00 \$ 200 200.00 description: Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit Brief Pension plan, Through former 735 ILCS 5/12-1006 - \$0.00 Unknown description: employer, 0 Line from 100% of fair market value, up to 21 Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No Yes. 715680 Official Form 106C Record # Schedule C: The Property You Claim as Exempt Page 2 of 2

| Fill in this i  | nformation to ide  | ntify your case:  |   | Entered 08/3<br>8 of 59  |  |  |   |
|---|--|---|---|--|--|--|---|
| Debtor 1  | Mary   | Teresa  | Rzewuski  |  |  |  |   |
| 200101  | First Name   | Middle Name   | Last Name   | _  |  |  |   |
| Debtor 2  |  |   |   | _  |  |  |   |
| (Spouse, if filing)   | First Name   | Middle Name   | Last Name   |  |  |  |   |
| United State  | s Bankruptcy Court fo  | or the : <u>NORTHERN</u>  |   |  |  |  |   |
| Case Number   | er   |   | (State)   |  |  | Check if thi                                       | s is an                                   |
| (If known)  |  |   |   |  |  | amended fi   | ling                                      |
| Official F  | orm 106D   | )   |   |  |  |  |   |
|   |  | ='  | e Claims Secured by   | , Bronorty   |  |  | 1   |
|   |  |   | ried people are filing together, b  |  | la fau accombicione agreeat                                      |  |   |
|   | neck this box and  | submit this form to th  | e court with your other schedules   | YOU have nothing also to I   | enort on this form   |  |   |
|   | ill in all of the infor  |   | ·   | Too have nothing else to t   | oport on this form.  |  |   |
| Yes. F  | ill in all of the infor  |   |   | Tournave nothing else to t   |  | Column A   | Column (                                  |
| Part 1:   | List All Secured C   | ilaims  | an one secured claim, list the cre  |  | Column A Amount of claim   | Column A Value of collateral                       |   |
| Part 1:  2. List all so for each (  | List All Secured C   | a creditor has more the   | an one secured claim, list the cre<br>articular claim, list the other credi<br>al order according to the creditors  | ditor separately tors in Part 2.   | Column A   |  | Column C<br>Unsecure<br>portion<br>If any |
| Part 1:  2. List all se for each of As much   | List All Secured C   | a creditor has more the   | articular claim, list the other credi   | ditor separately<br>tors in Part 2.<br>s name.   | Column A  Amount of claim  Do not deduct the                     | Value of collateral that supports this             | Unsecure portion                          |
| 2. List all so for each o As much  Toyota  Creditor's   | List All Secured C<br>ecured claims. If a<br>claim. If more than<br>as possible, list the<br>a Motor Credit  | a creditor has more the none creditor has a pectains in alphabetic  | articular claim, list the other credital creditors and order according to the creditors   | ditor separately<br>tors in Part 2.<br>s name.<br>cures the claim:   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |
| 2. List all se for each of As much  Toyota  Creditor's  1111 V  | List All Secured C<br>ecured claims. If a<br>claim. If more than<br>as possible, list the<br>a Motor Credit<br>s Name<br>V 22Nd St Ste 420   | a creditor has more the none creditor has a pectains in alphabetic  | articular claim, list the other credical order according to the creditors  Describe the property that se  | ditor separately<br>tors in Part 2.<br>s name.<br>cures the claim:   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |
| 2. List all so for each o As much  Toyota  Creditor's   | List All Secured C<br>ecured claims. If a<br>claim. If more than<br>as possible, list the<br>a Motor Credit  | a creditor has more the none creditor has a pectains in alphabetic  | articular claim, list the other credital order according to the creditors  Describe the property that se  2012 Toyota RAV4 with over  | ditor separately tors in Part 2. s name. cures the claim:  | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |
| 2. List all se for each of As much  Toyota  Creditor's  1111 V  | List All Secured C<br>ecured claims. If a<br>claim. If more than<br>as possible, list the<br>a Motor Credit<br>s Name<br>V 22Nd St Ste 420   | a creditor has more the none creditor has a pectains in alphabetic  | articular claim, list the other credical order according to the creditors  Describe the property that se  | ditor separately tors in Part 2. s name. cures the claim:  | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |
| 2. List all se for each of As much  Toyota  Creditor's 1111 V  Number  Oak Bi   | ecured claims. If a claim. If more than as possible, list the a Motor Credit is Name V 22Nd St Ste 420 Street  | a creditor has more the none creditor has a peeclaims in alphabetic   | articular claim, list the other credital order according to the creditors  Describe the property that se  2012 Toyota RAV4 with over  As of the date you file, the cla  | ditor separately tors in Part 2. s name. cures the claim:  | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |
| 2. List all so for each of As much  Toyota  Creditor's 1111 V  Number   | ecured claims. If a claim. If more than as possible, list the a Motor Credit is Name V 22Nd St Ste 420 Street  | a creditor has more the none creditor has a peeclaims in alphabetic   | articular claim, list the other credital order according to the creditors  Describe the property that se  2012 Toyota RAV4 with over  As of the date you file, the cla  | ditor separately tors in Part 2. s name. cures the claim:  | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |
| 2. List all se for each of As much  Toyota  Creditor's 1111 V  Number  Oak Bi  City   | ecured claims. If a claim. If more than as possible, list the a Motor Credit is Name V 22Nd St Ste 420 Street  | a creditor has more the none creditor has a period color of the color | articular claim, list the other credical order according to the creditors  Describe the property that se  2012 Toyota RAV4 with over  As of the date you file, the cla  Contingent  Unliquidated  | ditor separately tors in Part 2. s name. cures the claim: 23,500 miles   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |
| 2. List all se for each a smuch  2.1 Toyota  Creditor's 1111 V  Number  Oak Bi City  Who owe                                  | ecured claims. If a claim. If more than as possible, list the a Motor Credit is Name V 22Nd St Ste 420 Street  | a creditor has more the none creditor has a period color of the color | articular claim, list the other credical order according to the creditors  Describe the property that se  2012 Toyota RAV4 with over  As of the date you file, the cla  Contingent  Unliquidated  Disputed  | ditor separately tors in Part 2. s name. cures the claim: 23,500 miles im is: Check all that apply.  | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |
| 2. List all so for each of As much  2.1 Toyota  Creditor's 1111 V  Number  Oak Bin City  Who owe                              | List All Secured Concerned Claims. If a claim. If more than as possible, list the a Motor Credit is Name V 22Nd St Ste 420 Street  Took  s the debt? Check of 1 only T 2 only  | a creditor has more the none creditor has a pele claims in alphabetic claims in alphabetic claims in alphabetic claims.   | articular claim, list the other credical order according to the creditors  Describe the property that se  2012 Toyota RAV4 with over  As of the date you file, the cla  Contingent Unliquidated Disputed  Nature of Lien. Check all that a  An agreement you made (sur car loan)  | ditor separately tors in Part 2. s name. cures the claim: 23,500 miles im is: Check all that apply. apply. ch as mortgage or secured                   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |
| 2. List all so for each of As much  2.1 Toyota  Creditor's 1111 V  Number  Oak Bi City  Who owe Debtor Debtor Debtor          | ecured claims. If a claim. If more than as possible, list the a Motor Credit is Name V 22Nd St Ste 420 Street  Took  s the debt? Check of 1 only if 2 only if 1 and Debtor 2 only if 1 and Debtor 2 only if 2 only if 2 only if 1 and Debtor 2 only if 2 only if 1 and Debtor 2 only if 2 only if 2 only if 1 and Debtor 2 only if 2 o | a creditor has more the none creditor has a pele claims in alphabetic claims in alphabetic claims in alphabetic claims.   | articular claim, list the other credical order according to the creditors  Describe the property that se  2012 Toyota RAV4 with over  As of the date you file, the cla  Contingent  Unliquidated  Disputed  Nature of Lien. Check all that a  An agreement you made (succar loan)  Statutory lien (such as tax lie                          | ditor separately tors in Part 2. s name. cures the claim: 23,500 miles im is: Check all that apply. apply. ch as mortgage or secured                   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |
| 2. List all so for each of As much  2.1 Toyota  Creditor's 1111 V  Number  Oak Bi City  Who owe Debtor Debtor Debtor          | List All Secured Concerned Claims. If a claim. If more than as possible, list the a Motor Credit is Name V 22Nd St Ste 420 Street  Took  s the debt? Check of 1 only T 2 only  | a creditor has more the none creditor has a pele claims in alphabetic claims in alphabetic claims in alphabetic claims.   | articular claim, list the other credical order according to the creditors  Describe the property that se  2012 Toyota RAV4 with over  As of the date you file, the cla  Contingent Unliquidated Disputed  Nature of Lien. Check all that a  An agreement you made (sucar loan) Statutory lien (such as tax lie Judgment lien from a lawsuit | ditor separately tors in Part 2. s name.  cures the claim: 23,500 miles  sim is: Check all that apply.  ch as mortgage or secured  n, mechanic's lien) | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |
| 2. List all se for each of As much  2.1 Toyota  Creditor's 1111 V  Number  Oak Bi City  Who owe  Debtoi Debtoi At leas  Check | ecured claims. If a claim. If more than as possible, list the a Motor Credit is Name V 22Nd St Ste 420 Street  Took  s the debt? Check of 1 only if 2 only if 1 and Debtor 2 only if 1 and Debtor 2 only if 2 only if 2 only if 1 and Debtor 2 only if 2 only if 1 and Debtor 2 only if 2 only if 2 only if 1 and Debtor 2 only if 2 o | a creditor has more the none creditor has a pele claims in alphabetic claims in alphabetic claims in alphabetic claims are claims in alphabetic claims.   | articular claim, list the other credical order according to the creditors  Describe the property that se  2012 Toyota RAV4 with over  As of the date you file, the cla  Contingent  Unliquidated  Disputed  Nature of Lien. Check all that a  An agreement you made (succar loan)  Statutory lien (such as tax lie                          | ditor separately tors in Part 2. s name.  cures the claim: 23,500 miles  sim is: Check all that apply.  ch as mortgage or secured  n, mechanic's lien) | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |

| Fill in th   | Caso 16 '   |  | Filed 09/21/16   | Entered 08/31/16 16:50:44<br>9 of 59   | Desc Main                      |                    |
|--|---|--|--|--|--------------------------------|--------------------|
|  |   |  |  | 9 01 39  |                                |                    |
| Debtor 1   | •   | Teresa   | Rzewuski   |  |                                |                    |
| Debtor 2   | First Name  | Middle Name  | Last Name  |  |                                |                    |
| (Spouse, if f  | •   | Middle Name  | Last Name  |  |                                |                    |
| United S   | tates Bankruntov Court for th   | ne: <u>NORTHERN</u> District o   | f IIIINOIS   |  |                                |                    |
|  |   | ic . <u>NORTHERN</u> District C  | (State)  |  | Check if this is               | s an               |
| Case Nu<br>(If known                                 |   |  |  |  | amended filing                 |                    |
| Officia  | l Form 106E/F   |  |  |  |                                | •                  |
|  |   | <u>-</u>   | secured Claims   |  |                                | 12/15              |
| ist the oth<br>I/B: Prope<br>reditors w<br>eeded, co | ner party to any executor<br>rty (Official Form 106A/I<br>ith partially secured cla<br>py the Part you need, fil<br>additional pages, write y | ry contracts or unexpired<br>B) and on <i>Schedule G: Exc</i><br>ims that are listed in <i>Sch</i> e | leases that could result in<br>ecutory Contracts and Une<br>dule D: Creditors Who Hav<br>s in the boxes on the left. A | s and Part 2 for creditors with NONPRIORITY a claim. Also list executory contracts on Sche expired Leases (Official Form 106G). Do not in ve Claims Secured by Property. If more space attach the Continuation Page to this page. On | edule<br>clude any<br>is       |                    |
| 1. Do any  | creditors have priority   | unsecured claims against   | you?   |  |                                |                    |
| No   | . Go to Part 2.   |  |  |  |                                |                    |
| Ye   | S.  |  |  |  |                                |                    |
| each c<br>nonpri<br>unsecu                           | laim listed, identify what a<br>prity amounts. As much a<br>ured claims, fill out the Co  | type of claim it is. If a claim<br>as possible, list the claims in<br>ontinuation Page of Part 1.    | has both priority and nonpr  | secured claim, list the creditor separately for eactiority amounts, list that claim here and show boting to the creditor's name. If you have more than olds a particular claim, list the other creditors in Fuction booklet.)        | h priority and<br>two priority |                    |
|  |   |  |  | Total claim  | Priority Non<br>amount amo     | priority<br>ount   |
| Part 2:  | List All of Your NONP   | RIORITY Unsecured Claims   |  |  |                                |                    |
| 3. Do any  | creditors have nonprio  | rity unsecured claims aga  | inst you?  |  |                                |                    |
| ∏ No   | . You have nothing to re  | port in this part. Submit thi  | s form to the court with your  | other schedules.   |                                |                    |
| Ye   | S.  | •  | •  |  |                                |                    |
| nonprio<br>include                                   | ority unsecured claim, list   | the creditor separately for one creditor holds a particu   | each claim. For each claim   | or who holds each claim. If a creditor has more listed, identify what type of claim it is. Do not list itors in Part 3.If you have more than three nonpr   | t claims already               |                    |
| ⊓ BK   | OF AMER   | Last   | 4 dinite of account mount on   | NULL   |                                | al claim<br>187.00 |
| 7.1  | ditor's Name  | Last   | 4 digits of account number   |  | φ <u>0,</u>                    | . 3 0              |
|  | Box 982238  | Whe  | n was the debt incurred?   | 2008-2015  |                                |                    |
| Nun  | nber Street   | <b>A</b> o o   | f the data you file the claim  | in. Check all that analy   |                                |                    |
|  |   |  | f the date you file, the claim contingent  | із: Спеск ан тпат арріу.   |                                |                    |
|  | Paso  | TX 79998   | Inliquidated   |  |                                |                    |
| City<br>Who  | owes the debt? Check one  | State Zip Code   | Disputed   |  |                                |                    |
| De   | ebtor 1 only  |  |  |  |                                |                    |
| =  | ebtor 2 only  |  | of NONPRIORITY unsecure  | d claim:   |                                |                    |
| =  | ebtor 1 and Debtor 2 only   |  | student loans  | ration agreement or diverse  |                                |                    |
| =  | least one of the debtors and  | <del>-</del>   | Obligations arising out of a sepa<br>nat you did not report as priority  |  |                                |                    |
|  | neck if this claim relates to<br>ommunity debt  | · · · —  |  | g plans, and other similar debts   |                                |                    |
| Is the   | claim subject to offest?  | _  |  |  |                                |                    |
| No   |   |  | Other. Specify Credit Card   | or Credit Use  |                                |                    |
| Ye   | es  |  |  |  |                                |                    |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Page 20 of 59
Case Number (if known) **Document** Mary Teresa Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | sting any entries on this page, number them b    | eginning with 4.4, followed by 4.5, and so forth.    |                 | Total Claim        |
|----------|--|--|-----------------|--------------------|
| 4.2      | CAP1/Bstby                                       | Last 4 digits of account numberNULL                  |                 | \$ <u>0.00</u>     |
|          | Creditor's Name                                  | When was the debt incurred? 2009-20                  | 13              |                    |
|          | 26525 N Riverwoods Blvd                          | When was the debt incurred?                          |                 |                    |
|          | Number Street                                    |  |                 |                    |
|          |  | As of the date you file, the claim is: Check all tha | at apply.       |                    |
|          | Mettawa IL 60045                                 | Contingent   |                 |                    |
|          | City State Zip Code                              | Unliquidated   |                 |                    |
| '        | Who owes the debt? Check one.                    | Disputed   |                 |                    |
|          | Debtor 1 only                                    |  |                 |                    |
|          | Debtor 2 only                                    | Type of NONPRIORITY unsecured claim:                 |                 |                    |
| ļļ       | Debtor 1 and Debtor 2 only                       | ☐ Student loans                                      |                 |                    |
| <u> </u> | At least one of the debtors and another          | Obligations arising out of a separation agreement    | or divorce      |                    |
| [        | Check if this claim relates to a                 | that you did not report as priority claims           |                 |                    |
| ۱ ا      | community debt s the claim subject to offest?    | Debts to pension or profit-sharing plans, and other  | r similar debts |                    |
| l i      | No   | Other. Specify Credit Card or Credit Use             |                 |                    |
| Ī        | Yes  | Other. Specify                                       |                 |                    |
| 4.3      | Capital ONE BANK USA N                           | Last 4 digits of account numberNULL                  |                 | <b>\$</b> 1,463.00 |
|          | Creditor's Name                                  | When was the debt incurred? 1999-20                  | 14              |                    |
|          | 15000 Capital One Dr                             | When was the debt incurred?                          | <del></del>     |                    |
|          | Number Street                                    |  |                 |                    |
|          |  | As of the date you file, the claim is: Check all the | at apply.       |                    |
|          | Richmond VA 23238                                | Contingent   |                 |                    |
|          | City State Zip Code                              | Unliquidated   |                 |                    |
| \        | Who owes the debt? Check one.                    | Disputed   |                 |                    |
|          | Debtor 1 only                                    |  |                 |                    |
| [        | Debtor 2 only                                    | Type of NONPRIORITY unsecured claim:                 |                 |                    |
| [        | Debtor 1 and Debtor 2 only                       | Student loans  |                 |                    |
| [        | At least one of the debtors and another          | Obligations arising out of a separation agreement    | or divorce      |                    |
| [        | Check if this claim relates to a                 | that you did not report as priority claims           |                 |                    |
| ١.,      | community debt<br>s the claim subject to offest? | Debts to pension or profit-sharing plans, and other  | r similar debts |                    |
|          | No   | Other. Specify Credit Card or Credit Use             |                 |                    |
| Ī        | Yes  | Other. Specify                                       |                 |                    |
| 4.4      | Capital ONE BANK USA N.A.                        | Last 4 digits of account number3426                  | <del></del>     | \$ <u>4,861.00</u> |
|          | Creditor's Name                                  | When was the debt incurred? 2015-20                  | 16              |                    |
|          | 120 Corporate Blvd Ste 1                         | When was the debt incurred?                          | 10              |                    |
|          | Number Street                                    |  |                 |                    |
|          |  | As of the date you file, the claim is: Check all the | at apply.       |                    |
|          | Norfolk VA 23502                                 | Contingent   |                 |                    |
|          | City State Zip Code                              | Unliquidated   |                 |                    |
| \        | Who owes the debt? Check one.                    | Disputed   |                 |                    |
|          | Debtor 1 only                                    |  |                 |                    |
|          | Debtor 2 only                                    | Type of NONPRIORITY unsecured claim:                 |                 |                    |
|          | Debtor 1 and Debtor 2 only                       | Student loans  |                 |                    |
|          | At least one of the debtors and another          | Obligations arising out of a separation agreement    | or divorce      |                    |
|          | Check if this claim relates to a                 | that you did not report as priority claims           |                 |                    |
| .        | community debt s the claim subject to offest?    | Debts to pension or profit-sharing plans, and other  | r similar debts |                    |
|          | No   | Other. Specify Unknown Credit Extension              |                 |                    |
|          | Yes  | Other. Specify Officiown Credit Extension            | <del></del>     |                    |
|          |  |  |                 |                    |

Case 16-28085 Doc 1 Page 21 of 59 Case Number (if known) **Document** Mary Teresa Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| 4.5      | Chase CARD   | Last 4 digits of account number NULL                              | \$ <u>12,680.00</u> |
|----------|--|---|---------------------|
|          | Creditor's Name                                    | When was the debt incurred? 2001-2014                             |                     |
|          | Po Box 15298                                       | When was the debt incurred?                                       |                     |
|          | Number Street                                      |   |                     |
|          |  | As of the date you file, the claim is: Check all that apply.      |                     |
|          |  | Contingent  |                     |
|          | Wilmington DE 19850                                | Unliquidated  |                     |
|          | City State Zip Code  Who owes the debt? Check one. | Disputed  |                     |
| ľ        |  |   |                     |
|          | Debtor 1 only                                      | Two of NONDRODITY was a word ability                              |                     |
|          | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                     |
|          | Debtor 1 and Debtor 2 only                         | Student loans   |                     |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                     |
| [        | Check if this claim relates to a                   | that you did not report as priority claims                        |                     |
| ۱,       | community debt<br>s the claim subject to offest?   | Debts to pension or profit-sharing plans, and other similar debts |                     |
| ľ        | No   | Cradit Card or Cradit Llag  |                     |
|          | Yes  | Other. Specify Credit Card or Credit Use                          |                     |
| 4.6      | Citibank N.A.                                      | Last 4 digits of account number 3933                              | <b>\$</b> 1,232.00  |
| 7.0      | Creditor's Name                                    |   | -                   |
|          | 2365 Northside Dr Ste 30                           | When was the debt incurred? 2014-2015                             |                     |
|          | Number Street                                      |   |                     |
|          |  | As of the date you file, the claim is: Check all that apply.      |                     |
|          |  |   |                     |
|          | San Diego CA 92108                                 | Contingent  |                     |
|          | City State Zip Code                                | Unliquidated  |                     |
| <u> </u> | Who owes the debt? Check one.                      | Disputed  |                     |
|          | Debtor 1 only                                      |   |                     |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                     |
|          | Debtor 1 and Debtor 2 only                         | Student loans   |                     |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                     |
| [        | Check if this claim relates to a                   | that you did not report as priority claims                        |                     |
| -        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                     |
| l:       | s the claim subject to offest?                     |   |                     |
|          | No   | Other. Specify Unknown Credit Extension                           |                     |
|          | Yes Citibank N A                                   | 5276  | <b>A 2 010 00</b>   |
| 4.7      | Citibank N.A.                                      | Last 4 digits of account number <u>5376</u>                       | \$ <u>2,010.00</u>  |
|          | Creditor's Name 2365 Northside Dr Ste 30           | When was the debt incurred? 2014-2014                             |                     |
|          | Number Street                                      |   |                     |
|          | . Gast   |   |                     |
|          |  | As of the date you file, the claim is: Check all that apply.      |                     |
|          | San Diego CA 92108                                 | Contingent  |                     |
|          | City State Zip Code                                | Unliquidated  |                     |
| V        | Who owes the debt? Check one.                      | Disputed  |                     |
|          | Debtor 1 only                                      |   |                     |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                     |
| Ī        | Debtor 1 and Debtor 2 only                         | Student loans   |                     |
| ļŤ       | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                     |
| 7        | Check if this claim relates to a                   | that you did not report as priority claims                        |                     |
| "        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                     |
| l:       | s the claim subject to offest?                     |   |                     |
|          | No   | Inknown Credit Extension  |                     |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Page 22 of 59
Case Number (if known) **Document** Mary Teresa Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | sting any entries on this page, number them b    | eginning with 4.4, followed by 4.5, and so forth.                 | Total Claim      |
|----------|--|---|------------------|
| 4.8      | Comcast  | Last 4 digits of account number 6131                              | <b>\$</b> 139.00 |
|          | Creditor's Name                                  | <del></del>   |                  |
|          | Po Box 64378                                     | When was the debt incurred? 2016-2016                             |                  |
|          | Number Street                                    |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          | <del></del>                                      |   |                  |
|          | Saint Paul MN 55164                              | ☐ Contingent  |                  |
|          | City State Zip Code                              | Unliquidated  |                  |
| V        | Vho owes the debt? Check one.                    | Disputed  |                  |
|          | Debtor 1 only                                    |   |                  |
|          | Debtor 2 only                                    | Type of NONPRIORITY unsecured claim:                              |                  |
| Ī        | Debtor 1 and Debtor 2 only                       | Student loans   |                  |
| İ        | At least one of the debtors and another          | Obligations arising out of a separation agreement or divorce      |                  |
| l i      | Check if this claim relates to a                 | that you did not report as priority claims                        |                  |
| "        | community debt                                   | Debts to pension or profit-sharing plans, and other similar debts |                  |
| l I      | s the claim subject to offest?                   |   |                  |
|          | No   | Other. Specify Collecting for Creditor                            |                  |
| [        | Yes  | Cition. Opening   |                  |
| 4.9      | Credit ONE BANK NA                               | Last 4 digits of account number NULL                              | <b>\$</b> 4.00   |
| <u> </u> | Creditor's Name                                  | <del></del>   |                  |
|          | Po Box 98875                                     | When was the debt incurred? 2016-2016                             |                  |
|          | Number Street                                    |   |                  |
|          |  | As of the date you file the claim is: Check all that apply        |                  |
|          | <del></del>                                      | As of the date you file, the claim is: Check all that apply.      |                  |
|          | Las Vegas NV 89193                               | ☐ Contingent  |                  |
|          | City State Zip Code                              | Unliquidated  |                  |
| V        | Vho owes the debt? Check one.                    | Disputed  |                  |
|          | Debtor 1 only                                    |   |                  |
| Ī        | Debtor 2 only                                    | Type of NONPRIORITY unsecured claim:                              |                  |
| l i      | Debtor 1 and Debtor 2 only                       | Student loans   |                  |
| l i      | At least one of the debtors and another          | Obligations arising out of a separation agreement or divorce      |                  |
|          | =  | that you did not report as priority claims                        |                  |
| 1        | Check if this claim relates to a community debt  | Debts to pension or profit-sharing plans, and other similar debts |                  |
| l I      | s the claim subject to offest?                   | bests to pension of pronesharing plans, and other similar desis   |                  |
|          | No   | Other. Specify Credit Card or Credit Use                          |                  |
| l i      | Yes  | Other: Specify  |                  |
| 4.10     | DirecTV  | Last 4 digits of account number                                   | \$ 900.00        |
| 7.10     | Creditor's Name                                  |   | ·                |
|          | PO Box 78626                                     | When was the debt incurred?                                       |                  |
|          | Number Street                                    |   |                  |
|          |  |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          | Phoenix AZ 85062                                 | Contingent  |                  |
|          | City State Zip Code                              | Unliquidated  |                  |
| \ \ \    | Vho owes the debt? Check one.                    | Disputed  |                  |
| r        | Debtor 1 only                                    |   |                  |
| İ        | Debtor 2 only                                    | Type of NONPRIORITY unsecured claim:                              |                  |
|          | Debtor 1 and Debtor 2 only                       | Student loans   |                  |
|          | At least one of the debtors and another          | Obligations arising out of a separation agreement or divorce      |                  |
|          |  | <del>_</del>  |                  |
| L        | Check if this claim relates to a                 | that you did not report as priority claims                        |                  |
|          | community debt<br>s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts |                  |
| l i      | No   | Litility Dillo/Callylar Canica                                    |                  |
|          | =  | Other. Specify Utility Bills/Cellular Service                     |                  |
|          | Yes  |   |                  |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Page 23 of 59
Case Number (if known) **Document** Mary Teresa Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

| After li  | sting any entries on this page, number them be     | eginning with 4.4, followed by 4.5, an  | nd so forth.                  | Total Claim        |
|-----------|--|---|-------------------------------|--------------------|
| 4.11      | GE Capital Retail BANK                             | Last 4 digits of account number         | 8887                          | \$ <u>2,376.00</u> |
|           | Creditor's Name 120 Corporate Blvd Ste 1           | When was the debt incurred?             | 2014-2014                     |                    |
|           | Number Street                                      | When was the dest incurred:             |                               |                    |
|           | Number Sueet                                       |   |                               |                    |
|           |  | As of the date you file, the claim is:  | Check all that apply.         |                    |
|           | Norfolk VA 23502                                   | Contingent                              |                               |                    |
|           | City State Zip Code                                | Unliquidated                            |                               |                    |
| v         | Who owes the debt? Check one.                      | Disputed                                |                               |                    |
|           | Debtor 1 only                                      |   |                               |                    |
|           | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | claim:                        |                    |
| Ī         | Debtor 1 and Debtor 2 only                         | Student loans                           |                               |                    |
| Ī         | At least one of the debtors and another            | Obligations arising out of a separati   | on agreement or divorce       |                    |
| 1 7       | Check if this claim relates to a                   | that you did not report as priority cla | aims                          |                    |
| "         | community debt                                     | Debts to pension or profit-sharing p    | lans, and other similar debts |                    |
| ls ls     | s the claim subject to offest?                     |   |                               |                    |
|           | No   | Other. Specify Unknown Credi            | it Extension                  |                    |
| $\sqcup$  | Yes  |   | NIII.                         | 507.00             |
| 4.12      | Kohls/Capone                                       | Last 4 digits of account number         | NULL                          | <u>\$ 527.00</u>   |
|           | Creditor's Name                                    | When was the debt incurred?             | 2012-2016                     |                    |
|           | N56 W 17000 Ridgewood Dr                           | when was the debt incurred?             | <u> </u>                      |                    |
|           | Number Street                                      |   |                               |                    |
|           |  | As of the date you file, the claim is:  | Check all that apply.         |                    |
|           | Menomonee Falls WI 53051                           | Contingent                              |                               |                    |
|           | City State Zip Code                                | Unliquidated                            |                               |                    |
| V         | Who owes the debt? Check one.                      | Disputed                                |                               |                    |
|           | Debtor 1 only                                      |   |                               |                    |
| Ī         | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | claim:                        |                    |
| Ī         | Debtor 1 and Debtor 2 only                         | Student loans                           |                               |                    |
| li        | At least one of the debtors and another            | Obligations arising out of a separati   | on agreement or divorce       |                    |
| l i       | Check if this claim relates to a                   | that you did not report as priority cla | aims                          |                    |
| -         | community debt                                     | Debts to pension or profit-sharing p    | lans, and other similar debts |                    |
| ls ls     | s the claim subject to offest?                     | _                                       |                               |                    |
|           | No   | Other. Specify Credit Card or 0         | Credit Use                    |                    |
| $\square$ | Yes  |   |                               |                    |
| 4.13      | Midland Funding, LLC                               | Last 4 digits of account number         | <del></del>                   | \$ <u>1,231.51</u> |
|           | Creditor's Name                                    | Miles was the debt in summed 2          |                               |                    |
|           | 8875 Aero Drive, # 200                             | When was the debt incurred?             |                               |                    |
|           | Number Street                                      |   |                               |                    |
|           |  | As of the date you file, the claim is:  | Check all that apply.         |                    |
|           | Can Diago  | Contingent                              |                               |                    |
|           | San Diego CA 92123                                 | Unliquidated                            |                               |                    |
| v         | City State Zip Code  Vho owes the debt? Check one. | Disputed                                |                               |                    |
| Г         | Debtor 1 only                                      |   |                               |                    |
| Ī         | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | claim:                        |                    |
|           | Debtor 1 and Debtor 2 only                         | Student loans                           |                               |                    |
|           | At least one of the debtors and another            | Obligations arising out of a separati   | on agreement or divorce       |                    |
|           | Check if this claim relates to a                   | that you did not report as priority cla | •                             |                    |
|           | community debt                                     | Debts to pension or profit-sharing p    |                               |                    |
| ls        | s the claim subject to offest?                     |   |                               |                    |
|           | No   | Other. Specify Credit Card or 0         | Credit Use                    |                    |
|           | Yes  |   |                               |                    |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main

Page 24 of 59 Rocument Mary Teresa Debtor 1

| Pa    | Your NONPRIORITY Unsecured Claims - C  | ontinuation Page  |                    |
|-------|--|---|--------------------|
| After | listing any entries on this page, number them b                                  | eginning with 4.4, followed by 4.5, and so forth.                 | Total Claim        |
| 4.14  | Midland Funding, LLC   | Last 4 digits of account number                                   | \$ <u>2,010.17</u> |
|       | Creditor's Name  |   |                    |
|       | 8875 Aero Drive, # 200   | When was the debt incurred?                                       |                    |
|       | Number Street  |   |                    |
|       |  | As of the date you file, the claim is: Check all that apply.      |                    |
|       | San Diego CA 92123   | Contingent  |                    |
|       | San Diego         CA         92123           City         State         Zip Code | Unliquidated  |                    |
|       | Who owes the debt? Check one.  | Disputed  |                    |
|       | Debtor 1 only  |   |                    |
|       | Debtor 2 only  | Type of NONPRIORITY unsecured claim:                              |                    |
|       | Debtor 1 and Debtor 2 only   | Student loans   |                    |
|       | At least one of the debtors and another  | Obligations arising out of a separation agreement or divorce      |                    |
|       | Check if this claim relates to a   | that you did not report as priority claims                        |                    |
|       | community debt   | Debts to pension or profit-sharing plans, and other similar debts |                    |
|       | Is the claim subject to offest?  |   |                    |
|       | No Yes   | Other. Specify Credit Card or Credit Use                          |                    |
| 4.15  | Couthwest Credit   | Last 4 digits of account number                                   | <b>\$</b> 1,500.00 |
| 11.10 | Creditor's Name  |   |                    |
|       | 4120 International Pkwy #1100  | When was the debt incurred?                                       |                    |
|       | Number Street  |   |                    |
|       |  | As of the date you file, the claim is: Check all that apply.      |                    |
|       |  | Contingent  |                    |
|       | Carrollton TX 75007  | Unliquidated  |                    |
|       | City State Zip Code  Who owes the debt? Check one.                               | Disputed  |                    |
|       | Debtor 1 only  |   |                    |
|       | Debtor 2 only  | Type of NONPRIORITY unsecured claim:                              |                    |
|       | Debtor 1 and Debtor 2 only   | Student loans   |                    |
|       | At least one of the debtors and another  | Obligations arising out of a separation agreement or divorce      |                    |
|       | Check if this claim relates to a   | that you did not report as priority claims                        |                    |
|       | community debt   | Debts to pension or profit-sharing plans, and other similar debts |                    |
|       | Is the claim subject to offest?  | _   |                    |
|       | ■ No   | Other. Specify Medical Debt                                       |                    |
| 4.16  | State FARM Financial S   | Last 4 digits of account number NULL                              | \$ 9,196.00        |
| 4.10  | Creditor's Name  |   |                    |
|       | 3 State Farm Plaza N-4   | When was the debt incurred? 2005-2014                             |                    |
|       | Number Street  |   |                    |
|       |  | As of the date you file, the claim is: Check all that apply.      |                    |
|       |  | Contingent  |                    |
|       | Bloomington IL 61791   | Unliquidated  |                    |
|       | City State Zip Code  Who owes the debt? Check one.                               | Disputed  |                    |
|       | Debtor 1 only  | <del>_</del>  |                    |
|       | Debtor 2 only  | Type of NONPRIORITY unsecured claim:                              |                    |
|       | Debtor 1 and Debtor 2 only   | Student loans   |                    |
|       | At least one of the debtors and another  | Obligations arising out of a separation agreement or divorce      |                    |
|       | Check if this claim relates to a   | that you did not report as priority claims                        |                    |
|       | community debt   | Debts to pension or profit-sharing plans, and other similar debts |                    |
|       | Is the claim subject to offest?  | _   |                    |
|       | No □   | Other. Specify Credit Card or Credit Use                          |                    |
|       | <u></u> Yes  |   |                    |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Page 25 of 59 **Document** Mary Teresa Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | sting any entries on this page, number them be     | ginning with 4.4, followed by 4.5, and so forth.                  | Total Claim    |
|----------|--|---|----------------|
| 4.17     | Syncb/HH GREGG                                     | Last 4 digits of account number NULL                              | \$ <u>0.00</u> |
|          | Creditor's Name                                    |   |                |
|          | Po Box 965036                                      | When was the debt incurred? 2013-2015                             |                |
|          | Number Street                                      |   |                |
|          |  | As of the date you file, the claim is: Check all that apply.      |                |
|          |  | Contingent  |                |
|          | Orlando FL 32896                                   | Unliquidated  |                |
|          | City State Zip Code  Who owes the debt? Check one. | Disputed  |                |
| ľ        |  |   |                |
|          | Debtor 1 only Debtor 2 only                        | Time of NONDRIORITY are assured alsimo                            |                |
|          | Debtor 1 and Debtor 2 only                         | Type of NONPRIORITY unsecured claim:  Student loans               |                |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                |
|          |  | that you did not report as priority claims                        |                |
| "        | Check if this claim relates to a community debt    | Debts to pension or profit-sharing plans, and other similar debts |                |
| ls       | s the claim subject to offest?                     |   |                |
|          | No   | Other. Specify Credit Card or Credit Use                          |                |
|          | Yes  |   |                |
| 4.18     | Syncb/SAMS CLUB                                    | Last 4 digits of account number NULL                              | \$ <u>0.00</u> |
|          | Creditor's Name                                    | When was the debt incurred? 2005-2015                             |                |
|          | Po Box 965005                                      | When was the debt incurred? 2005-2015                             |                |
|          | Number Street                                      |   |                |
|          |  | As of the date you file, the claim is: Check all that apply.      |                |
|          | Oderste El 20000                                   | Contingent  |                |
|          | Orlando FL 32896                                   | Unliquidated  |                |
| v        | City State Zip Code  Vho owes the debt? Check one. | Disputed  |                |
|          | Debtor 1 only                                      |   |                |
| Ī        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                |
| lī       | Debtor 1 and Debtor 2 only                         | Student loans   |                |
| li       | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                |
| l i      | Check if this claim relates to a                   | that you did not report as priority claims                        |                |
|          | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                |
| ls       | s the claim subject to offest?                     |   |                |
|          | No   | Other. Specify Credit Card or Credit Use                          |                |
| $\vdash$ | Yes  | AILILI  | + 0.00         |
| 4.19     | Syncb/Toysrusdc                                    | Last 4 digits of account number NULL                              | \$ <u>0.00</u> |
|          | Creditor's Name Po Box 965005                      | When was the debt incurred? 2012-2014                             |                |
|          | Number Street                                      |   |                |
|          | Trainber Street                                    |   |                |
|          |  | As of the date you file, the claim is: Check all that apply.      |                |
|          | Orlando FL 32896                                   | Contingent  |                |
|          | City State Zip Code                                | Unliquidated  |                |
| v        | Who owes the debt? Check one.                      | Disputed  |                |
|          | Debtor 1 only                                      |   |                |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                |
| [        | Debtor 1 and Debtor 2 only                         | Student loans   |                |
| [        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                |
|          | Check if this claim relates to a                   | that you did not report as priority claims                        |                |
| .        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                |
|          | s the claim subject to offest?                     |   |                |
| -        | No Yes   | Other. Specify Credit Card or Credit Use                          |                |
|          | 1 ES   |   |                |

Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Case 16-28085

Page 26 of 59
Case Number (if known) Rocument Mary Teresa Debtor 1

Your NONPRIORITY Unsecured Claims - Continuation Page

| After lis | sting any entries on this page, number them be | ginning with 4.4, followed by 4.5, and    | I so forth.                 | Total Claim        |
|-----------|--|---|-----------------------------|--------------------|
| 4.20      | Synchrony BANK                                 | Last 4 digits of account number           | 8066                        | \$ <u>1,175.00</u> |
|           | Creditor's Name                                |   | 0045 0045                   |                    |
|           | 120 Corporate Blvd Ste 1                       | When was the debt incurred?               | 2015-2015                   |                    |
|           | Number Street                                  |   |                             |                    |
|           |  | As of the date you file, the claim is:    | Check all that apply.       |                    |
|           |  | Contingent                                |                             |                    |
|           | Norfolk VA 23502                               | Unliquidated                              |                             |                    |
|           | City State Zip Code                            | Disputed                                  |                             |                    |
| \ \ \ \ \ | /ho owes the debt? Check one.                  | Disputed                                  |                             |                    |
|           | Debtor 1 only                                  |   |                             |                    |
|           | Debtor 2 only                                  | Type of NONPRIORITY unsecured cla         | aim:                        |                    |
|           | Debtor 1 and Debtor 2 only                     | Student loans                             |                             |                    |
| <u> </u>  | At least one of the debtors and another        | Obligations arising out of a separation   | -                           |                    |
| [         | Check if this claim relates to a               | that you did not report as priority clair |                             |                    |
|           | community debt                                 | Debts to pension or profit-sharing pla    | ns, and other similar debts |                    |
|           | the claim subject to offest?                   |   | Entension                   |                    |
|           | 5  | Other. Specify Unknown Credit             | EXTENSION                   |                    |
| 4.21      | Yes<br>Synchrony BANK                          | Last 4 digits of account number           | 4876                        | <b>\$</b> 6,627.00 |
| 4.21      | Creditor's Name                                | East 4 digits of account number           | <del></del>                 | ·                  |
|           | 120 Corporate Blvd Ste 1                       | When was the debt incurred?               | 2015-2015                   |                    |
|           | Number Street                                  |   |                             |                    |
|           |  | As of the date you file, the claim is:    | Check all that apply        |                    |
|           | <del></del>                                    | _   | опеск ан тат арргу.         |                    |
|           | Norfolk VA 23502                               | Contingent                                |                             |                    |
|           | City State Zip Code                            | Unliquidated                              |                             |                    |
| <u> </u>  | /ho owes the debt? Check one.                  | Disputed                                  |                             |                    |
|           | Debtor 1 only                                  |   |                             |                    |
| <u>L</u>  | Debtor 2 only                                  | Type of NONPRIORITY unsecured cla         | aim:                        |                    |
| [         | Debtor 1 and Debtor 2 only                     | Student loans                             |                             |                    |
| [         | At least one of the debtors and another        | Obligations arising out of a separation   | n agreement or divorce      |                    |
|           | Check if this claim relates to a               | that you did not report as priority clair | ms                          |                    |
| -         | community debt                                 | Debts to pension or profit-sharing pla    | ns, and other similar debts |                    |
| Is        | the claim subject to offest?                   | _   |                             |                    |
|           | No   | Other. Specify Unknown Credit             | Extension                   |                    |
| $\vdash$  | Yes TD BANK USA/Targetcred                     |   | NULL                        | <b>\$</b> 115.00   |
| 4.22      |  | Last 4 digits of account number           | NOLL                        | \$_113.00          |
|           | Creditor's Name Po Box 673                     | When was the debt incurred?               | 2012-2016                   |                    |
|           | Number Street                                  |   |                             |                    |
|           |  |   |                             |                    |
|           |  | As of the date you file, the claim is:    | Check all that apply.       |                    |
|           | Minneapolis MN 55440                           | Contingent                                |                             |                    |
|           | City State Zip Code                            | Unliquidated                              |                             |                    |
| <u> </u>  | /ho owes the debt? Check one.                  | Disputed                                  |                             |                    |
|           | Debtor 1 only                                  |   |                             |                    |
| [         | Debtor 2 only                                  | Type of NONPRIORITY unsecured cla         | aim:                        |                    |
|           | Debtor 1 and Debtor 2 only                     | Student loans                             |                             |                    |
| [         | At least one of the debtors and another        | Obligations arising out of a separation   | n agreement or divorce      |                    |
| Ī         | Check if this claim relates to a               | that you did not report as priority clair | ns                          |                    |
| "         | community debt                                 | Debts to pension or profit-sharing pla    | ns, and other similar debts |                    |
| ls        | the claim subject to offest?                   |   |                             |                    |
|           | No   | Other. Specify Credit Card or Ci          | redit Use                   |                    |
|           | Yes  |   |                             |                    |

Case 16-28085

Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main

Mary Debtor 1

Teresa

Rocument

Page 27 of 59
Case Number (if known)

List Others to Be Notified for a Debt That You Already Listed

| 5. | Use this page only if you have others to be notified ab example, if a collection agency is trying to collect from 2, then list the collection agency here. Similarly, if you additional creditors here. If you do not have additional | you for a debt<br>have more thar | you owe to someone else, list the originan one creditor for any of the debts that yo | al creditor in Parts 1 or<br>ou listed in Parts 1 or 2, list the                                      |
|----|---|----------------------------------|--|---|
|    | Clerk, Third Mun Div  |                                  | On which entry in Part 1 or Part 2 I   | list the original creditor?   |
|    | Name<br>2121 Euclid Ave #121  |                                  | Line 3 of (Check one):   | Part 1: Creditors with Priority Unsecured Claims  |
|    | Number Street   |                                  |  | Part 2: Creditors with Nonpriority Unsecured Claims   |
|    | Rolling Meadows   | IL 60008                         | Last 4 digits of account number _  | NULL  |
|    |   | Zip Code                         |  |   |
|    | Blatt, Hasenmiller, Leibsker & Moore LLC  Name  |                                  | On which entry in Part 1 or Part 2 I   | -   |
|    | 10 S. LaSalle St. Ste 2200  |                                  | Line 3 of (Check one):   | Part 1: Creditors with Priority Unsecured Claims  |
|    | Number Street   |                                  |  | Part 2: Creditors with Nonpriority Unsecured Claims   |
|    |   |                                  |  | NULL  |
|    |   | L 60603<br>Zip Code              | Last 4 digits of account number _  | NULL  |
|    | Nelson, Watson & Associates   |                                  | On which entry in Part 1 or Part 2 I   | list the original creditor?   |
|    | Name  |                                  | Line 4 of (Check one):   | Part 1: Creditors with Priority Unsecured Claims  |
|    | 80 Merrimack St., Lower Level  Number Street  |                                  | Line or (Check one).   | Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |
|    | Trained Gleek   |                                  |  | at 1 stands man to promy change came  |
|    | Haverhill   | MA 01830                         | Last 4 digits of account number _  | 3426  |
|    | City State  | Zip Code                         |  | <del></del>   |
|    | LVNV Funding LLC  |                                  | On which entry in Part 1 or Part 2 I   | list the original creditor?   |
|    | Name<br>PO Box 10584  |                                  | Line 9 of (Check one):   | Part 1: Creditors with Priority Unsecured Claims  |
|    | Number Street   |                                  |  | Part 2: Creditors with Nonpriority Unsecured Claims   |
|    |   |                                  |  |   |
|    | Greenville  | SC 29603                         | Last 4 digits of account number _  | <u>NULL</u>   |
|    | City State  | Zip Code                         |  |   |
|    | DuPage County Clerk   |                                  | On which entry in Part 1 or Part 2 I   | list the original creditor?   |
|    | Name<br>421 N County Farm Rd.   |                                  | Line 13 of (Check one):  | Part 1: Creditors with Priority Unsecured Claims  |
|    | Number Street   |                                  |  | Part 2: Creditors with Nonpriority Unsecured Claims   |
|    |   |                                  |  |   |
|    | Wheaton   | IL 60187                         | Last 4 digits of account number _  |   |
|    |   | Zip Code                         |  |   |
|    | Clerk, Third Mun Div  |                                  | On which entry in Part 1 or Part 2 I   | list the original creditor?   |
|    | Name<br>2121 Euclid Ave #121  |                                  | Line15 of (Check one):   | Part 1: Creditors with Priority Unsecured Claims  |
|    | Number Street   |                                  |  | Part 2: Creditors with Nonpriority Unsecured Claims   |
|    |   |                                  |  |   |
|    | Rolling Meadows   | IL 60008                         | Last 4 digits of account number _  | NULL  |
|    | City State  | Zip Code                         |  |   |

Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Case 16-28085 Page 28 of 59 Case Number (if known) **Document** Mary Teresa Debtor 1 Last Name Blatt, Hasenmiller, Leibsker & Moore LLC On which entry in Part 1 or Part 2 list the original creditor? Line \_\_15\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims 10 S. LaSalle St. Ste 2200 Part 2: Creditors with Nonpriority Unsecured Claims Number Street Last 4 digits of account number \_\_\_\_ NULL Chicago 60603 State Zip Code Monarch Recovery Management On which entry in Part 1 or Part 2 list the original creditor? Name 10965 Decatur Rd. Line \_\_\_17\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Street Number

Last 4 digits of account number \_\_\_\_ NULL \_\_\_

PA 19154

State Zip Code

Official Form 106E/F

Philadelphia

City

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Page 29 of 59
Case Number (if known)

Debtor 1 Mary Teresa

**Document** 

Add the Amounts for Each Type of Unsecured Claim

| 6. | Total the amounts of certain types of unsecured claims. | This information is for statistical reporting purposes only. 28 U.S.C. § 159. |
|----|---|---|
|    | Add the amounts for each type of unsecured claim.       |   |

|                             |  |            | Total claim        |
|-----------------------------|--|------------|--------------------|
| Total claims<br>from Part 1 | 6a. Domestic support obligations   | 6a.        | \$0.00             |
| Hom Fait i                  | 6b. Taxes and Certain other debts you owe the government   | 6b.        | \$0.00             |
|                             | 6c. Claims for death or personal injury while you were intoxicated   | 6c.        | \$0.00             |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims.  Write that amount here.  | 6d.        | \$0.00             |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.   | 6e.        | \$0.00             |
|                             |  |            |                    |
|                             |  |            | Total claim        |
| Total claims                | 6f. Student loans  | 6f.        | Total claim \$0.00 |
| Total claims<br>from Part 2 | 6f. Student loans  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims   | 6f.<br>6g. | 0.00               |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority   |            | \$0.00             |
|                             | <ul> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other</li> </ul>   | 6g.        | \$                 |
|                             | <ul> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other similar debts</li> <li>6i. Other. Add all other nonpriority unsecured claims.</li> </ul> | 6g.<br>6h. | \$                 |

Schedule E/F: Creditors Who Have Unsecured Claims

| Fil  | l in this in                                       | Caso 16<br>formation to iden  |  | Filad 09/21/16   | Entered 08/31/16 16:50:44<br>0 of 59   | Desc Main           |
|------|--|---|--|--|--|---------------------|
| De   | ebtor 1  | Mary  | Teresa   | Rzewuski   |  |                     |
|      |  | First Name  | Middle Name  | Last Name  |  |                     |
|      | ebtor 2<br>ouse, if filing)                        | First Name  | Middle Name  | Last Name  |  |                     |
| Ur   | ited States  | Bankruptcy Court fo   | r the : <u>NORTHERN</u> District of  | <u>ILLINOIS</u>  |  |                     |
|      | ise Number   |   |  | (State)  |  | Check if this is an |
|      |  | orm 106C  |  |  |  | amended filing      |
|      |  | orm 106G  | ory Contracts and  |  |  | 12/15               |
| 1. D | nation. If nonal pages o you hav No. Che Yes. Fill | nore space is needs, write your name eany executory each this box and so in all of the informely each personent, vehicle lease, | eded, copy the additional page and case number (if known contracts or unexpired leases submit this form to the court with mation below even if the contract or company with whom you have and case and case are submitted. | e, fill it out, number the er  a).  th your other schedules. You  acts or leases are listed in  ave the contract or lease. | n are equally responsible for supplying correct ntries, and attach it to this page. On the top of an our have nothing else to report on this form.  Schedule A/B: Property (Official Form 106A/B)  Then state what each contract or lease is for (for a contract or booklet for more examples of executory contract. | or                  |
|      | ·  |   | hom you have the contract o  | r lease  | State what the contract or lease   | e is for            |
| 2.1  |  |   |  |  | -  |                     |
|      | Name   |   |  |  | _  |                     |
|      | Number   | Street  |  |  |  |                     |
|      | City   |   | State Z  | ip Code  | -  |                     |
| 2.2  |  |   |  |  |  |                     |
| 2.2  | Name   |   |  |  | -  |                     |
|      |  |   |  |  | -  |                     |
|      | Number   | Street  |  |  |  |                     |
|      | City   |   | State Z  | ip Code  | -  |                     |
| 2.3  |  |   |  |  |  |                     |
|      | Name   |   |  |  | -  |                     |
|      | Number   | Street  |  |  | -  |                     |
|      | City   |   | State Z  | ip Code  | -  |                     |
| 2.4  |  |   |  |  |  |                     |
|      | Name   |   |  |  | -  |                     |
|      | Number   | Street  |  |  | -  |                     |
|      | City   |   | State Z  | ip Code  | -  |                     |
| 2.5  |  |   |  |  |  |                     |
|      | Name   |   |  |  |  |                     |
|      | Number   | Street  |  |  | -  |                     |

State Zip Code

City

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main

| Fill in this in     | nformation to ider  | ntify your case:                       |           |
|---------------------|---------------------|--|-----------|
| Debtor 1            | Mary                | Teresa                                 | Rzewuski  |
|                     | First Name          | Middle Name                            | Last Name |
| Debtor 2            |                     |  |           |
| (Spouse, if filing) | First Name          | Middle Name                            | Last Name |
| United States       | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of _ | ILLINOIS  |
| Case Number         | r                   |  | (State)   |
| (If known)          |                     |  | _         |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| ally F | Auditio                               | onal Pages, write your name and         | u case number (ii known). Answ                                     | er every question.    |   |
|--------|---------------------------------------|---|--|-----------------------|---|
| 1. [   | Οο γοι                                | u have any codebtors? (If you ar        | re filing a joint case, do not list eit                            | her spouse as a codel | btor.)  |
|        | No                                    | ).                                      |  |                       |   |
|        | Ye                                    | es                                      |  |                       |   |
|        |                                       |   | I in a community property state<br>levada, New Mexico, Puerto Rico |                       | nity property states and territories include                        |
| '      |                                       | o. Go to line 3.                        | evada, New Mexico, Fuello Nico                                     | , rexas, washington,  | and wisconsin.)   |
|        | =                                     |   | ise, or legal equivalent live with yo                              | ou at the time?       |   |
| L      | ֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓ | No                                      |  |                       |   |
|        |                                       | Yes. Inwhich community state            | e or territory did you live?                                       | Fill in               | the name and current address of that person.                        |
|        |                                       |   |  | <del></del>           |   |
|        |                                       | Name of your spouse, former spouse or l | legal equivalent   |                       |   |
|        |                                       | Number Street                           |  |                       |   |
|        |                                       | City                                    | State  | Zip Code              |   |
|        |                                       | •                                       | • •  |                       | pouse is filing with you. List the person                           |
|        |                                       | =                                       |  | -                     | re you have listed the creditor on cial Form 106G). Use Schedule D, |
|        |                                       | lule E/F, or Schedule G to fill ou      |  | 0.00.00.00.00.00      |   |
|        | Colu                                  | umn 1: Your codebtor                    |  |                       | Column 2: The creditor to whom you owe the debt                     |
|        |                                       |   |  |                       | Check all schedules that apply:                                     |
| 3.1    |                                       |   |  |                       | Schedule D, line  |
|        | Nan                                   | ne                                      |  |                       | Schedule E/F, line  |
|        | Nur                                   | mber Street                             |  |                       | Schedule G, line  |
|        | City                                  | <i>I</i>                                | State  | Zip Code              | _   |
| 3.2    |                                       |   |  |                       | Schedule D, line  |
|        | Nan                                   | ne                                      |  |                       | Schedule E/F, line  |
|        | Nur                                   | mber Street                             |  |                       | Schedule G, line  |
|        | City                                  |   | State  | Zip Code              | _   |
| 3.3    |                                       |   |  |                       | Schedule D, line  |
|        | Nan                                   | ne                                      |  |                       | Schedule E/F, line  |
|        | Nur                                   | mber Street                             |  |                       | Schedule G, line  |
|        | City                                  | /                                       | State  | Zip Code              |   |

Official Form 106H Record # 715680 Schedule H: Your Codebtors Page 1 of 1

|                                      | Case 16-280   |  |  | red 08/31/16 16:50:44<br>32 of 59  | Desc Main   |
|--------------------------------------|---|--|--|--|---|
| Fill in this                         | s information to identify y   |  |  | 01 33  |   |
| Debtor 1                             | Mary<br>First Name  | Teresa  Middle Name  | Rzewuski<br>Last Name  |  |   |
| Debtor 2<br>(Spouse, if filir        | ing) First Name   | Middle Name  | Last Name  |  |   |
| United Sta<br>Case Num<br>(If known) | ates Bankruptcy Court for the   | : <u>NORTHERN DISTRICT C</u>   | OF ILLINOIS  | <b>—</b> ···   | g<br>owing post-petition<br>e as of the following date: |
|                                      | Form 1061<br>ule I: Your Inc  | come   |  | MM / DD / YYYY   | _   |
| supplying co                         | orrect information. If you a parated and your spouse                                  | re married and not filing jis not filing jis not filing with you, do n | ointly, and your spouse is living voor include information about you | Debtor 2), both are equally responsik<br>with you, include information about y<br>r spouse. If more space is needed, at<br>er (if known). Answer every question. | our spouse.<br>tach a                                   |
| 1. Fill in y                         | your employment<br>ation  |  | Debtor 1   | Debt   | or 2 or non-filing spouse                               |
| attach                               | have more than one job,<br>a separate page with<br>lation about additional<br>layers. | Employment status  | Employed  X Not employed   | Empl   | oyed<br>mployed   |

or homemaker, if it applies. **Employers name Employers address** How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary and commissions (before all payroll \$0.00 \$0.00 deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. \$0.00 \$0.00 4. Calculate gross income. Add line 2 + line 3. \$0.00 \$0.00

Retired

Include part-time, seasonal, or self-employed work.

Occupation may Include student

Occupation

 Official Form 106I
 Record # 715680
 Schedule I: Your Income
 Page 1 of 2

Case 16-28085 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Doc 1 Page 33 of 59

Document Teresa Mary Debtor 1 Case Number (if known)

|  | First Name  | Middle Name   | Last Name  |                  |                      |                        |                                    |
|--|---|---|--|------------------|----------------------|------------------------|------------------------------------|
|  |   |   |  |                  | For Debtor 1         |                        | or Debtor 2 or<br>on-filing spouse |
| Сор  | y line 4 here   |   |  | 4.               | \$0.00               |                        | \$0.00                             |
| 5. List al   | I payroll deductions:   |   |  |                  |                      |                        |                                    |
| 5a.  | Tax, Medicare, and S  | Social Security deductions  |  | 5a.              | \$0.00               |                        | \$0.00                             |
| 5b.  | Mandatory contribut   | ions for retirement plans   |  | 5b.              | \$0.00               |                        | \$0.00                             |
| 5c.  | Voluntary contribution  | ons for retirement plans  |  | 5c.              | \$0.00               |                        | \$0.00                             |
| 5d.  | Required repayment  | s of retirement fund loans  |  | 5d.              | \$0.00               |                        | \$0.00                             |
| 5e.  | Insurance   |   |  | 5e.              | \$0.00               |                        | \$0.00                             |
| 5f.  | Domestic support ob   | oligations  |  | 5f.              | \$0.00               |                        | \$0.00                             |
| 5g.  | Union dues  |   |  | 5g.              | \$0.00               |                        | \$0.00                             |
| 5h.  | Other deductions. S   | pecify:   |  | 5h.              | \$0.00               |                        | \$0.00                             |
| 6. <b>Add th</b>   | e payroll deductions  | . Add lines 5a + 5b + 5c + 5d   | + 5e +5f + 5g +5h.                                 | 6.               | \$0.00               |                        | \$0.00                             |
| 7. Calcula   | ate total monthly tak   | e-home pay. Subtract line 6 f   | rom line 4.  | 7.               | \$0.00               | ΙĒ                     | \$0.00                             |
| 8. List all  | other income regula   | rly received:   |  | _                |                      | _                      |                                    |
| 8a.  | Net income from re  | ental property and from ope   | rating a business,                                 |                  |                      |                        |                                    |
|  | profession, or farm   | 1   |  |                  |                      |                        |                                    |
|  |   | for each property and busine<br>nd necessary business exper   | 0.0  |                  |                      |                        |                                    |
|  | monthly net income  |   |  | 8a.              | \$0.00               |                        | \$0.00                             |
| 8b.  | Interest and divide   | nds   |  | 8b.              | \$0.00               |                        | \$0.00                             |
| 8c.  | Family support pay  | yments that you, a non-filing<br>ly receive   | յ spouse, or a                                     | 8c.              | \$ 0.00              |                        | \$ 0.00                            |
|  | Include alimony, sp   | ousal support, child support,   | maintenance, divorce                               |                  |                      |                        |                                    |
|  | settlement, and pro   | perty settlement.   |  |                  |                      |                        |                                    |
| 8d.  | Unemployment co   | mpensation  |  | 8d.              | \$0.00               |                        | \$0.00                             |
| 8e.  | Social Security   |   |  | 8e.              | \$1,562.00           |                        | \$0.00                             |
| 8f.  | Other government  | assistance that you regular   | ly receive   | 8f.              | \$0.00               |                        | \$0.00                             |
|  | Include cash assist   | ance and the value (if known)   | ) of any non-cash                                  |                  |                      |                        |                                    |
|  | Supplemental Nutri  | receive, such as food stamp<br>tion Assistance Program) or I  | housing subsidies.                                 |                  |                      |                        |                                    |
| 8g.  | Pension or retirem  | ent income  |  | 8g.              | \$1,923.34           |                        | \$0.00                             |
| 8h.  | Other monthly inco  | ome. Specify:   |  | 8h.              | \$0.00               |                        | \$0.00                             |
| 9. Add   | all other income. Ad  | dd lines 8a + 8b + 8c + 8d + 8  | 3e + 8f +8g + 8h.                                  | 9.               | \$3,485.34           |                        | \$0.00                             |
|  | <del>-</del>  | ne. Add line 7 + line 9.<br>for Debtor 1 and Debtor 2 or  | non-filing spouse.                                 | 10.              | \$3,485.34           | +                      | \$0.00                             |
| Inclusion of the Double Special Property of the Write Property of the Property | ude contributions from er friends or relatives. not include any amou cify:  I the amount in the la e that amount on the | entributions to the expenses on an unmarried partner, mem on the already included in lines 2 ast column of line 10 to the a summary of Schedules and se or decrease within the years. | 2-10 or amounts that are amount in line 11. The re | not available to | p pay expenses liste | d in <i>Sch</i><br>ne. |                                    |

| FIII IN t                                 | nis information to identify   | y your case:   |                                     |  |  |   |  |
|---|---|--|-------------------------------------|--|--|---|--|
| Debtor  Debtor  (Spouse, it               | First Name  | Teresa Middle Name Middle Name                               | Rzewuski  Last Name  Last Name      | Check if this is:  An amended filing  A supplement showing post-petition chapter 13 income as of the following date: |  |   |  |
|   |   | e : <u>NORTHERN DISTRICT O</u>                               | F ILLINOIS                          | <br>MM / DD  | / YYYY                                     |   |  |
| Case N<br>(If know                        |   |  |                                     |  |  |   |  |
| Officia                                   | al Form 106J  |  |                                     |  | ite filing for Debtoi<br>s a separate hous | r 2 because Debtor 2<br>ehold.  |  |
| Sche                                      | dule J: Your E  | xpenses  |                                     |  |  | 12/14   |  |
|   | -   |  | ·                                   | e equally responsible for supp<br>s, write your name and case n  |  |   |  |
| Part 1:                                   | Describe Your Househ  | old  |                                     |  |  |   |  |
|   | s a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in No.  Yes. Debtor 2 l | n a separate household?<br>must file a separate Schedul      | e J.                                |  |  |   |  |
|   | you have dependents?  not list Debtor 1 and   | No X Yes Fill out  | this information for                | Dependent's relationship to<br>Debtor 1 or Debtor 2  | Dependent's age                            | Does dependent live with you?   |  |
| Del                                       | btor 2.   |  | dent                                | Granddaughter  | 6  | X No  |  |
| nar                                       | not state the dependents' nes.  |  |                                     |  |  | Yes  X No  Yes  X No  Yes  X No  Yes  X No  Yes  X No  Yes  X No  Yes |  |
| exp                                       | your expenses include<br>penses of people other the<br>urself and your dependen     |  |                                     |  |  |   |  |
| Part 2:                                   | Estimate Your Ongoin  | g Monthly Expenses   |                                     |  |  |   |  |
| expenses<br>the applications<br>Include e | s as of a date after the bar<br>cable date.<br>expenses paid for with no            | nkruptcy is filed. If this is a<br>n-cash government assista | supplemental <i>Schedule J</i> , ch | s a supplement in a Chapter 1<br>leck the box at the top of the f  | -  | Your expenses   |  |
| 4. Th                                     | e rental or home ownersh  | ip expenses for your reside                                  | ence. Include first mortgage p      | ayments and  | _  |   |  |
| any                                       | y rent for the ground or lot.   |  |                                     |  | 4.   | \$750.00  |  |
| 4a.                                       | . Real estate taxes   |  |                                     |  | 4a.  | \$0.00  |  |
| 4b.                                       | . Property, homeowner's   | , or renter's insurance                                      |                                     |  | 4b.  | \$0.00  |  |
| 4c.<br>4d.                                |   | pair, and upkeep expenses on or condominium dues             |                                     |  | 4c.<br>4d.                                 | \$0.00<br>\$0.00  |  |
|   | . Homeowner a association   | on or condominant dues                                       |                                     |  | ти.  | Ψ0.00   |  |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Rzewuski Page 35 of 59

Last Name

Case Number (if known) \_

Mary Teresa Middle Name

Debtor 1

First Name

|                | First Name Middle Name Last Name   |      |  |      |
|----------------|--|------|--|------|
|                |  |      | Your expenses  |      |
| 5. <b>A</b> d  | dditional Mortgage payments for your residence, such as home equity loans                            | 5.   | \$0.   | 0.00 |
| 6. <b>U</b> t  | ilities:   |      |  |      |
| 6a             | . Electricity, heat, natural gas   | 6a.  | \$150  | 0.00 |
| 6b             | . Water, sewer, garbage collection   | 6b.  | \$0  | 0.00 |
| 60             | Telephone, cell phone, internet, satellite, and cable service  | 6c.  | \$15<br>\$27<br>\$<br>\$65<br>\$7<br>\$44<br>\$7<br>\$25<br>\$7<br>\$20<br>\$20<br>\$3<br>\$9<br>\$3<br>\$42<br>\$3<br>\$42<br>\$3<br>\$42<br>\$3<br>\$42<br>\$3<br>\$442<br>\$3<br>\$442<br>\$3<br>\$442<br>\$3<br>\$442<br>\$442 | 0.00 |
| 60             | l. Other. Specify:   | 6d.  | \$ 0   | 0.00 |
| 7. <b>F</b> c  | ood and housekeeping supplies  | 7.   | \$650  | 0.00 |
| 8. <b>C</b> I  | nildcare and children's education costs  | 8.   | \$0  | 0.00 |
| 9. <b>C</b> I  | othing, laundry, and dry cleaning  | 9.   | \$75   | 5.00 |
| 10. <b>P</b> € | ersonal care products and services   | 10.  | \$40   | 0.00 |
| 11. <b>M</b> e | edical and dental expenses   | 11.  | \$75   | 5.00 |
| 12. <b>Tr</b>  | ansportation. Include gas, maintenance, bus or train fare.   | 12.  | \$255  | 5.00 |
| Do             | o not include car payments.  |      |  |      |
| 13. <b>E</b> r | ntertainment, clubs, recreation, newspapers, magazines, and books                                    | 13.  | \$75   | 5.00 |
| 14. <b>CI</b>  | naritable contributions and religious donations  | 14.  | \$200  | 0.00 |
| 15. <b>In</b>  | surance.   |      |  |      |
| Do             | o not include insurance deducted from your pay or included in lines 4 or 20.                         |      |  |      |
| 15             | ia. Life insurance   | 15a. | \$0  | 0.00 |
| 15             | b. Health insurance  | 15b. | \$0  | 0.00 |
| 15             | ic. Vehicle insurance  | 15c. | \$90   | 80.0 |
| 15             | id. Other insurance. Specify:  | 15d. | \$0  | 0.00 |
| 16. <b>T</b> a | ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.                      |      |  |      |
| Sp             | pecify:  | 16.  | \$0  | 0.00 |
| 17. <b>In</b>  | stallment or lease payments:   |      |  |      |
| 17             | a. Car payments for Vehicle 1  | 17a. | \$421  | 1.00 |
| 17             | b. Car payments for Vehicle 2  | 17b. | \$0  | 0.00 |
| 17             | c. Other. Specify:   | 17c. | \$0  | 0.00 |
| 17             | d. Other. Specify:   | 17d. | \$0  | 0.00 |
| 18. <b>Y</b> o | our payments of alimony, maintenance, and support that you did not report as deducted                |      |  |      |
| fre            | om your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).                          | 18.  | \$0  | 0.00 |
| 19. <b>O</b> 1 | ther payments you make to support others who do not live with you.                                   |      |  |      |
| Sr             | pecify:  | 19.  | \$0  | 0.00 |
|                | ther real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. |      |  |      |
| 20             | la. Mortgages on other property  | 20a. | \$ 0   | 0.00 |
| 20             | b. Real estate taxes   | 20b. | \$ 0   | 0.00 |
| 20             | c. Property, homeowner's, or renter's insurance  | 20c. | \$ 0   | 0.00 |
|                | ld. Maintenance, repair, and upkeep expenses   | 20d. | \$ 0   | 0.00 |
|                | le. Homeowner's association or condominium dues  | 20e. | \$ 0   | 0.00 |

Official Form 106J Record # 715680 Schedule J: Your Expenses Page 2 of 3 Teresa Mary Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name \$10.00 21. Other. Specify: \_\_\_Postage/Bank Fees (\$10.00), 21. \$3,061.08 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$3,485.34 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$3,061.08 23b. Copy your monthly expenses from line 22 above. 23b.-\$424.26 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 715680 Schedule J: Your Expenses Page 3 of 3

| Fill in this in           | formation to iden | tify your case:                     |                  |
|---------------------------|-------------------|-------------------------------------|------------------|
| Debtor 1                  | Mary              | Teresa                              | Rzewuski         |
|                           | First Name        | Middle Name                         | Last Name        |
| Debtor 2                  |                   |                                     |                  |
| (Spouse, if filing)       | First Name        | Middle Name                         | Last Name        |
| United States Case Number |                   | r the : <u>NORTHERN</u> District of | ILLINOIS (State) |
| (If known)                |                   |                                     |                  |

## Official Form 106 Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |
|---|---|
| Did you pay or agree to pay someone who is NOT ar                 | n attorney to help you fill out bankruptcy forms?   |
| ■ No  |   |
| Yes. Name of Person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|   |   |
|   |   |
|   |   |
| Under penalty of perjury, I declare that I have read the correct. | ne summary and schedules filed with this declaration and that they are true and               |
|   |   |
| ★ /s/ Mary Teresa Rzewuski  | <b>x</b>  |
| Signature of Debtor 1   | Signature of Debtor 2   |
| Date 08/29/2016   | Date  |
| MM / DD / YYYY  | MM / DD / YYYY  |
|   |   |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 38 of 59

| Fill in this in           | formation to ide | entify your case:                               |                       |
|---------------------------|------------------|---|-----------------------|
| Debtor 1                  | Mary First Name  | Teresa<br>Middle Name                           | Rzewuski<br>Last Name |
| Debtor 2                  |                  |   |                       |
| (Spouse, if filing)       | First Name       | Middle Name                                     | Last Name             |
| United States             | Bankruptcy Court | for the : <u>NORTHERN</u> District of <u>II</u> | LLINOIS(State)        |
| Case Number<br>(If known) | r                |   | (State)               |

## Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| number         | (if known). Answer every question.                       |                             |  |                               |
|----------------|--|-----------------------------|--|-------------------------------|
| Part 1         | Give Details About Your Marital Status and Wh            | nere You Lived Before       |  |                               |
| 01. <b>Wh</b>  | at is your current marital status?                       |                             |  |                               |
|                | Married  |                             |  |                               |
| _ =            | Not married  |                             |  |                               |
|                |  |                             |  |                               |
| 02 <b>D</b> ui | ring the last 3 years, have you lived anywhere oth       | ner than where you live no  | w?                                     |                               |
|                | No.  |                             |  |                               |
|                | Yes. List all of the places you lived in the last 3 year | ars. Do not include where   | ou live now.                           |                               |
|                | D. I.  | Date: Date: 4               | D.14.                                  | D. ( D.) ( )                  |
|                | Debtor 1   | Dates Debtor 1 lived there  | Debtor 2:                              | Dates Debtor 2<br>lived there |
|                |  |                             | Same as Debtor 1                       | Same as Debtor 1              |
|                | 6630 W Belmont Ave                                       | FROM 12/1997                |  |                               |
|                | Chicago IL 60634-4874                                    | To 06/2014                  |  |                               |
|                |  |                             |  |                               |
|                |  |                             |  |                               |
| 03 Wit         | hin the last 8 years, did you ever live with a spou      | se or legal equivalent in a | community property state or territory? | (Community                    |
| pro            | perty states and territories include Arizona, Calif      |                             |  |                               |
| _              | <b>I Wisconsin.)</b><br>No.                              |                             |  |                               |
| _              | Yes. Make sure you fill out Schedule H: Your Code        | ebtors (Official Form 106H) |  |                               |
| _              | •  |                             |  |                               |
|                |  |                             |  |                               |
| Part 2         | Explain the Sources of Your Income                       |                             |  |                               |
|                |  |                             |  |                               |
|                |  |                             |  |                               |
|                |  |                             |  |                               |
|                |  |                             |  |                               |
|                |  |                             |  |                               |
|                |  |                             |  |                               |
|                |  |                             |  |                               |
|                |  |                             |  |                               |
|                |  |                             |  |                               |
|                |  |                             |  |                               |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main

Page 39 of 59 Document Debtor 1 Mary Teresa Rzewuski Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$0 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, \$42,672 Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, \$43,000 (est) Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Social Security \$12,496 From January 1 of current year until the date you filed for bankruptcy: Pension \$15,384 Social Security \$8,334 For last calendar year: (January 1 to December 31, 2015) Pension \$18,579 Social Security For last calendar year: \$0 (January 1 to December 31, 2014) \$0 Pension

Entered 08/31/16 16:50:44 Desc Main Case 16-28085 Doc 1 Filed 08/31/16 Document Page 40 of 59 Mary Teresa Rzewuski Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 06 Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more?  $\square$  No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments Toyota Motor Credit 1111 W Monthly \$ 1,263 \$ 9,637 ■ Mortgage Car 22Nd St Ste 420 Oak Brook IL Credit card 60523 Loan repayment Suppliers or vendors Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid owe 08 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider. Reason for this payment Dates of Total amount Amount you still payment Include creditor's name paid owe Part 4: Identify Legal actions, Repossessions, and Foreclosures

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 41 of 59

| Debtor 1 | Mary                         | Teresa  | Rzewuski                         | Case Number (if known)   |                    |
|----------|------------------------------|---|----------------------------------|--|--------------------|
|          | First Name                   | Middle Name   | Last Name                        |  |                    |
| Lis      |                              | cluding personal injury case                          |                                  | rt action, or administrative proceeding?<br>es, collection suits, paternity actions, support or cust   | ody                |
|          | No.                          |   |                                  |  |                    |
|          | Yes. Fill in the detail      | ls.   |                                  |  |                    |
|          |                              |   | Nature of the case               | Court or agency  | Status of the case |
|          | Capital One Bank             | Usa Na VS Mary  | Collection                       | Circuit Court of Cook County, Third  | Pending            |
|          | Rzewuski                     |   |                                  | Municipal District   | On appeal          |
|          | CASE NUMBER#                 | 15M33137  |                                  |  | Concluded          |
|          |                              |   |                                  |  |                    |
|          | Midland Funding L            | lc VS Mary Rzewuski                                   | Collection                       | Circuit Court of Dupage County   | Pending            |
|          | CASE NUMBER#                 | 16SC1657  |                                  |  | On appeal          |
|          |                              |   |                                  |  | Concluded          |
|          |                              |   |                                  |  | _                  |
|          | Midland Funding I            | lc VS Mary Rzewuski                                   | Collection                       | Circiut Court of Dupage County   | Pending            |
|          | CASE NUMBER#                 | · · · · · · · · · · · · · · · · · · ·                 | CONGOLION                        |  | On appeal          |
|          | CASE NUMBER#                 | 10302732  |                                  |  | Concluded          |
|          |                              |   |                                  |  | Concluded          |
|          |                              |   |                                  |  |                    |
|          | State Form Bank \            | VS Mary Rzewuski                                      | Collection                       | Circuit Court of Cook County, Third  | Pending            |
|          | CASE NUMBER#                 | ·   | Collection                       | Municipal District   | On appeal          |
|          | CASE NUMBER#                 | 1310134020  |                                  |  | Concluded          |
|          |                              |   |                                  |  | ☐ Concluded        |
|          |                              |   |                                  |  |                    |
| CH       |                              | d fill in the details below.                          | any of your property repossesso  | ed, foreclosed, garnished, attached, seized, or levie  | d?                 |
| or       | refuse to make a pa          | you filed for bankruptcy, d<br>yment because you owed |                                  | ank or financial institution, set off any amounts fr   | om your accounts   |
| _        | No. Go to line 11            |   |                                  |  |                    |
| _        | Yes. Fill in the inform      |   |                                  | on the second se |                    |
|          |                              | er, a custodian, or another                           |                                  | possession of an assignee for the benefit of credi   | .UI 3, d           |
| _        | No.                          |   |                                  |  |                    |
|          | Yes.                         |   |                                  |  |                    |
| Part     | List Certain Gif             | its and Contributions                                 |                                  |  |                    |
|          | Y .                          |   | id you give any gifts with a to  | tal value of more than \$600 per person?   |                    |
| _        | No.                          |   | , , , , ,                        |  |                    |
| _        | Yes. Fill in the detai       | ls for each gift.                                     |                                  |  |                    |
| _        | _                            |   | id you give any gifts or contril | butions with a total value of more than \$600 to an  | y charity?         |
| _        | No.                          | . 37  |                                  |  | . <del>-</del>     |
| _        | No. Yes. Fill in the detai   | ls for each gift                                      |                                  |  |                    |
|          | 1 . co. r iii iii tile detal | io for edon gift.                                     |                                  |  |                    |
| Part     | List Certain Los             | sses  |                                  |  |                    |
|          |                              |   |                                  |  |                    |
|          |                              |   |                                  |  |                    |
| 1        |                              |   |                                  |  |                    |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 42 of 59

| ebtor       | 1          | Mary   | Teresa                 | Rzewuski   | Case Number (if kr                 | nown)                    |                   |
|-------------|------------|--|------------------------|--|------------------------------------|--------------------------|-------------------|
|             |            | First Name   | Middle Name            | Last Name  |                                    |                          |                   |
|             |            | iin 1 year before you filed<br>bling?                      | for bankruptcy or si   | nce you filed for bankruptcy, did  | you lose anything because of t     | heft, fire, other dis    | saster, or        |
|             | ١          | No.  |                        |  |                                    |                          |                   |
| [           | _<br> <br> | Yes. Fill in the details for ea                            | ach gift.              |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
| Par         | t 7:       | List Certain Payments                                      | or Transfers           |  |                                    |                          |                   |
| С           | ons        | sulted about seeking bank                                  | ruptcy or preparing    |  |                                    |                          | ou                |
| li          | nclu       | ude any attorneys, bankru                                  | ptcy petition prepare  | ers, or credit counseling agencies   | s for services required in your    | bankruptcy.              |                   |
|             | <u>ا</u> ا |  |                        |  |                                    |                          |                   |
|             | `          | Yes. Fill in the details                                   |                        |  |                                    |                          |                   |
|             | P          | Party Contact Info   |                        | Description and value of any   | property transferred               | Date payment or transfer | Amount of payment |
|             |            | Geraci Law L.L.C.  |                        |  |                                    |                          | \$1,200.00        |
|             |            | 55 E. Monroe Street #340                                   | 0                      |  |                                    |                          |                   |
|             |            | Chicago,IL 60603   |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
|             | P          | Party Contact Info   |                        | Description and value of any   | property transferred               | Date payment or transfer | Amount of payment |
|             |            | Hananwill Credit Counseli                                  | na                     | Credit Counseling Services   |                                    | 2016                     | \$25.00           |
|             |            | 115 N. Cross St.   |                        |  |                                    |                          |                   |
|             |            | Robinson, IL 62454   |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
| р           | ron        | -  | h your creditors or to | you or anyone else acting on you<br>o make payments to your credito<br>sted on line 16.          |                                    | pperty to anyone v       | vho               |
|             | 1          | No   |                        |  |                                    |                          |                   |
| •<br>[      | _          | Yes. Fill in the details.                                  |                        |  |                                    |                          |                   |
|             | _ '        | roo. I ili ili tilo dotalio.                               |                        |  |                                    |                          |                   |
| 18 <b>y</b> | Vith       | nin 2 years before you filed                               | d for bankruptcy, did  | you sell, trade, or otherwise tran   | sfer any property to anyone, o     | ther than property       |                   |
| h           | nclu       | _  | s and transfers made   | s or financial affairs?<br>e as security (such as the grantin<br>ready listed on this statement. | g of a security interest or mort   | gage on your prop        | perty).           |
| _           |            | _  | , o ui                 | , on and statements  |                                    |                          |                   |
| -           | <b>1</b>   |  | - al a:f4              |  |                                    |                          |                   |
| L           | י ו_       | Yes. Fill in the details for ea                            | ich gift.              |  |                                    |                          |                   |
|             |            | nin 10 years before you file<br>eficiary? (These are often |                        | d you transfer any property to a son devices.)   | self-settled trust or similar devi | ce of which you a        | re a              |
|             | 1          | No.  |                        |  |                                    |                          |                   |
| [           | _          | Yes. Fill in the details for ea                            | ach gift.              |  |                                    |                          |                   |
|             |            |  | -                      |  |                                    |                          |                   |
| Par         | t 8:       | List Certain Financial A                                   | Accounts, Instruments  | , Safe Deposit Boxes, and Storage  | Units                              |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |
|             |            |  |                        |  |                                    |                          |                   |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 43 of 59

| Debtor 1    | Mary  | Teresa  | Rzewuski   | Case                          | Number (if known)                     |  | _ |
|-------------|---|---|--|-------------------------------|---------------------------------------|--|---|
|             | First Name  | Middle Name   | Last Name  |                               |                                       |  |   |
|             | -   |   | y, were any financial accounts or ir   | nstruments held in your       | name, or for your bene                | efit, closed,                              |   |
|             | sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage |   |  |                               |                                       |  |   |
|             | ·   |   | ciations, and other financial institut   |                               |                                       | _  |   |
|             | No.   |   |  |                               |                                       |  |   |
|             | Yes. Fill in the de   | etails.   |  |                               |                                       |  |   |
|             |   |   | Last 4 digits of account number  | Type of account or instrument | Date account was closed, sold, moved, | Last balance before<br>closing or transfer |   |
|             |   |   |  | mattument                     | or transferred                        | closing of transfer                        |   |
|             |   |   |  |                               |                                       |  |   |
|             | o you now have, o   | -   | rear before you filed for bankruptcy   | y, any safe deposit box       | or other depository for               | securities,                                |   |
|             | No.   |   |  |                               |                                       |  |   |
|             | Yes. Fill in the de   | etails.   |  |                               |                                       |  |   |
|             |   |   | Who else had access to it?   | Describe the conto            | ents                                  | Do you still have it?                      |   |
| 22 H        | lave vou stored pr  | operty in a storage unit o                                    | or place other than your home withi  | in 1 vear before vou file     | d for bankruptcy?                     | nave it:                                   |   |
|             | No.   |   | •  |                               |                                       |  |   |
|             | Yes. Fill in the de   | etails.   |  |                               |                                       |  |   |
|             |   |   | Who else has or had access to it?  | Describe the conto            | ents                                  | Do you still                               |   |
|             |   |   |  |                               |                                       | have it?                                   |   |
| Pari        | Identify Pro  | perty You Hold or Control                                     | for Someone Else   |                               |                                       |  |   |
|             | o you hold or con<br>or someone.  | trol any property that so                                     | meone else owns? Include any pro   | perty you borrowed froi       | m, are storing for, or ho             | old in trust                               |   |
|             | No.   |   |  |                               |                                       |  |   |
|             | Yes. Fill in the de   | etails.   |  |                               |                                       |  |   |
|             |   |   | Where is the property?   | Describe the prop             | erty                                  | Value                                      |   |
|             | Cive Details  | s About Environmental Info                                    |  |                               |                                       |  |   |
| Part        |   |   |  |                               |                                       |  |   |
| For th      | e purpose of Part   | 10, the following definition                                  | ons apply:   |                               |                                       |  |   |
| ha          | zardous or toxic s  | substances, wastes, or m                                      | or local statute or regulation conce<br>aterial into the air, land, soil, surfa-<br>the cleanup of these substances, v | ce water, groundwater,        |                                       |  |   |
|             |   | ition, facility, or property<br>perate, or utilize it, includ | as defined under any environment<br>ing disposal sites.  | al law, whether you now       | own, operate, or utiliz               | e  |   |
|             |   |   | onmental law defines as a hazardo<br>ntaminant, or similar term.   | us waste, hazardous su        | bstance, toxic                        |  |   |
| Repoi       | rt all notices, relea   | ses, and proceedings the                                      | at you know about, regardless of w   | hen they occurred.            |                                       |  |   |
| 24 H        | _   | ntal unit notified you that                                   | you may be liable or potentially lia   | ible under or in violation    | n of an environmental I               | aw?  |   |
|             | No.  Yes. Fill in the de  | otoilo  |  |                               |                                       |  |   |
| L           | Yes. Fill in the de   | etalis.   | Governmental unit  | Environmental law             | , if you know it                      | Date of notice                             |   |
|             |   |   | Covernmental unit  | Liviloimientaria              | , ii you kilow k                      | Date of Hotioe                             |   |
| 25 <b>H</b> | lave you notified a   | ny governmental unit of                                       | any release of hazardous material?   | ?                             |                                       |  |   |
|             | No.   |   |  |                               |                                       |  |   |
|             | Yes. Fill in the de   | etails.   |  |                               |                                       |  |   |
|             |   |   | Governmental unit  | Environmental lav             | , if you know it                      | Date of notice                             |   |
| 26 <b>H</b> | lave you been a pa  | arty in any judicial or adn                                   | ninistrative proceeding under any e  | environmental law? Incli      | ude settlements and or                | ders.                                      |   |
|             | No.   |   |  |                               |                                       |  |   |
|             | Yes. Fill in the de   | etails.   |  |                               |                                       |  |   |
|             |   |   | Court or agency  | Nature of the case            |                                       | Status of the case                         |   |
| 1           |   |   |  |                               |                                       |  |   |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 44 of 59

|          |            | U           | ocument   | Page 44 01 59          |
|----------|------------|-------------|-----------|------------------------|
| Debtor 1 | Mary       | Teresa      | Rzewuski  | Case Number (if known) |
|          | First Name | Middle Name | Last Name |                        |

| Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?    A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   A member of a limited liability company (LLC) or limited liability partnership (LLP)   A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No | Part 11: Give Details About Your Business or Connections  | to Any Business   |
|---|---|---|
| A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.  Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  No. Yes. Fill in the details.  Date issued  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  X /s/ Mary Teresa Rzewuski Signature of Debtor 1  Date   | 27 Within 4 years before you filed for bankruptcy, did you o  | own a business or have any of the following connections to any business?        |
| A partner in a partnership  | A sole proprietor or self-employed in a trade, pro  | ofession, or other activity, either full-time or part-time                      |
| An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.  Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No. Yes. Fill in the details.  Date issued  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  X /s/ Mary Toresa Rzewuski Signature of Debtor 1  Date  | A member of a limited liability company (LLC) or  | · limited liability partnership (LLP)   |
| An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business.    Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.   No.  | A partner in a partnership  |   |
| No. None of the above applies. Go to Part 12.    Yes. Check all that apply above and fill in the details below for each business.    Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.   No.   | An officer, director, or managing executive of a  | corporation   |
| Yes. Check all that apply above and fill in the details below for each business.    Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.   No.  | An owner of at least 5% of the voting or equity so  | ecurities of a corporation  |
| Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  No.  Yes. Fill in the details.  Date issued  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.   ***X /s/ Marry Teresa Rzewuski** Signature of Debtor 1  Date   | No. None of the above applies. Go to Part 12.   |   |
| Institutions, creditors, or other parties.  No.   | Yes. Check all that apply above and fill in the details b   | elow for each business.   |
| Date issued  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.   **  **  **  **  **  **  **  **  **   |   | give a financial statement to anyone about your business? Include all financial |
| Part 12:   Sign Below   | No.   |   |
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.    **X  | Yes. Fill in the details.   |   |
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.     Yes   Mary Teresa Rzewuski   Signature of Debtor 1   Signature of Debtor 2   | Date issued   |   |
| answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.     Is   Mary Teresa Rzewuski   Signature of Debtor 1   Signature of Debtor 2  | Part 12: Sign Below   |   |
| Signature of Debtor 1  Date 08/29/2016  | in connection with a bankruptcy case can result in fines to 18 U.S.C. §§ 152, 1341, 1519, and 3571. | up to \$250,000, or imprisonment for up to 20 years, or both.                   |
| Date  |   |   |
| MM / DD / YYYY  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,  | orgination of position in   | 0.9.4.4.0 0. 200.0. 2   |
| MM / DD / YYYY  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,  | Date 08/29/2016   | Date  |
| No ☐ Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  ■ No ☐ Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,   |   | MM / DD / YYYY  |
| ■ No ■ Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,  | No  | ancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?       |
| Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,   | Did you pay or agree to pay someone who is not an attor   | ney to help you fill out bankruptcy forms?                                      |
|   | No  |   |
|   | Yes. Name of person   |   |

Caso 16 29095 Eilad 09/21/16 Entered 08/31/16 16:50:44 Fill in this information to identify your case: Teresa Rzewuski Mary Debtor 1 First Name Middle Name Last Name Debtor 2 (Spouse, if filing) Middle Name Last Name United States Bankruptcy Court for the : <u>NORTHERN DISTRICT OF ILLINOIS EASTERN</u> DIVISION District of ILLINOIS Check if this is an amended filing

#### Official Form 108

# Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- $\blacksquare$  you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors,

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

write your name and case number (if known).

| For any creditors that you listed in Part 1 of Schedule D: Credito information below.   | rs Who Have Claims Secured by Property (Official Form 106D   | ), fill in the                                      |
|---|--|---|
| Identify the creditor and the property that is collateral   | What do you intend to do with the property that secures a debt?  | Did you claim the property as exempt on Schedule C? |
| Creditor's name:  Toyota Motor Credit  Description of property securing debt:  Toyota Motor Credit  2012 Toyota RAV4 with over 23,500 miles | <ul> <li>Surrender the property</li> <li>Retain the property and redeem it</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul> | □ No ■ Yes  |
| Creditor's name:  Description of property securing debt:  | Surrender the property Retain the property and redeem it Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:  | □ No<br>□ Yes                                       |
| Creditor's name:  Description of property securing debt:  | Surrender the property Retain the property and redeem it Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:  | □ No □ Yes  |
| Creditor's name:  Description of property securing debt:  | Surrender the property Retain the property and redeem it Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:  | □ No □ Yes  |

Debtor 1

Mary

Case 16-28085

Doc 1

Filed 08/31

First Name

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|------|--------------------------------|-----------|
| rŧ   | Page 46 of 59 umber (if known) |           |

| Part 2: List Your Unexpired Personal Proper  | ty Leases   |                            |  |  |  |
|--|---|----------------------------|--|--|--|
| For any unexpired personal property lease that y   | ou listed in Schedule G: Executory Contracts and Unexpired Lea      | ses (Official Form 106G),  |  |  |  |
| ill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet |   |                            |  |  |  |
| ended. You may assume an unexpired personal  | property lease if the trustee does not assume it. 11 U.S.C. § 365(p | )(2).                      |  |  |  |
| Describe your unexpired personal property I  | eases   | Will the lease be assumed? |  |  |  |
| Lessor's name:   |   | ☐ No                       |  |  |  |
| Description of leased property:  |   | Yes                        |  |  |  |
| Lessor's name:   |   | ☐ No                       |  |  |  |
| Description of leased property:  |   | Yes                        |  |  |  |
| Lessor's name:   |   | □No                        |  |  |  |
| Description of leased property:  |   | Yes                        |  |  |  |
| Lessor's name:   |   | □No                        |  |  |  |
| Description of leased property:  |   | □Yes                       |  |  |  |
| Lessor's name:   |   | □No                        |  |  |  |
| Description of leased property:  |   | □Yes                       |  |  |  |
| Lessor's name:   |   | □No                        |  |  |  |
| Description of leased property:  |   | □Yes                       |  |  |  |
| Lessor's name:   |   | □ No                       |  |  |  |
| Description of leased property:  |   | Yes                        |  |  |  |
| Part 3: Sign Below   |   |                            |  |  |  |
| Inder penalty of perjury, I declare that I have indi   | cated my intention about any property of my estate that secures a   | a debt and any             |  |  |  |
| ersonal property that is subject to an unexpired   | lease.  |                            |  |  |  |
| /s/ Mary Teresa Rzewuski   | Singahan of Dahhan 2  | _                          |  |  |  |
| Signature of Debtor 1  | Signature of Debtor 2   |                            |  |  |  |
| Date Dated: 08/29/2016  MM / DD / YYYY   | Date<br>MM / DD / YYYY  |                            |  |  |  |
|  | · · · · · · · · · · · · · · · · · · ·                               |                            |  |  |  |

Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Case 16-28085 Page 47 of 59 Document

B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| ln 1 | re           |  |  |  |                           |   |                      |    |
|------|--------------|--|--|--|---------------------------|---|----------------------|----|
| Ma   | ry Teresa R  | zewuski / Debtor   |  |  | Case No:                  |   |                      |    |
|      |              |  |  |  | Chapter:                  | Chapter 7                                 |                      |    |
| con  | npensation p | o 11 U.S.C. § 329(a) and Fed. I aid to me within one year befo                               | Bankr. P. 2016(b), re the filing of the    | PENSATION OF ATTORNEY I certify that I am the attorney petition in bankruptcy, or agre lation of or in connection with | for the aboved to be paid | re named debtor(s<br>d to me, for service | ces                  |    |
|      | For legal s  | services, I have agreed to accep   | ot   | \$2,395.00   |                           |   |                      |    |
|      | Prior to th  | e filing of this statement I have  | e received                                 | \$1,200.00   |                           |   |                      |    |
|      | Balance D    | Due  |  | \$1,195.00   |                           |   |                      |    |
| 2.   | The source   | e of the compensation paid to n  | ne was:                                    |  |                           |   |                      |    |
|      | Deb          | tor(s) Other: (spec  | cify                                       |  |                           |   |                      |    |
| 3.   | The source   | e of compensation to be paid to  | me is:                                     |  |                           |   |                      |    |
|      | Del          | otor(s) Other: (spec   | cifv                                       |  |                           |   |                      |    |
| 4.   |              |  | -  | sation with any other person un  | nless they ar             | re members and a                          | ssociates            |    |
|      |              | law firm. A copy of the agree  | _  | on with a other person or person that a list of the names of the peo   |                           |   |                      |    |
| 5.   | In return fo |  | ve agreed to rende                         | er legal service for all aspects of  | f the bankru              | ptcy                                      |                      |    |
|      | a. Analy     | vsis of the debtor's financial sit   | uation, and render                         | ing advice to the debtor in dete   | ermining wh               | ether to file a peti                      | ition in             |    |
|      |              | uptcy;   |  |  |                           |   |                      |    |
|      | -            |  |  | ments of affairs and plan which  | -                         |   |                      |    |
|      | -            |  | _  | s and confirmation hearing, and  |                           | ned hearings ther                         | reof;                |    |
|      | -            |  | rsary proceedings                          | and other contested bankruptcy   | matters;                  |   |                      |    |
|      | e. [Othe     | r provisions as needed]  |  |  |                           |   |                      |    |
| 6.   |              |  |  | oes not include the following se   |                           |   |                      |    |
| cha  |              |  | -  | es, amendments to schedules<br>contested matters except the fir  | -                         | -   | conversions to anoth | er |
|      |              | I certify that the foregoin payment to me for representation of the control Date: 08/31/2016 | g is a complete state debtor(s) in this ba | RTIFICATION  Itement of any agreement or an  Inkruptcy proceedings.  Wylie W Mok                                       | rangement fo              | or  |                      |    |
|      |              | Date   | Si   | gnature of Attorney  |                           |   |                      |    |
|      |              |  | _(   | Geraci Law L.L.C.  |                           |   |                      |    |

Page 1 of 1 715680 Record #

Name of law firm

Geraci Law L.L.C.
CNational Freedom Response to the Company of the

Document Consultation Attorney: Date: 8/5/2016

**MOR** 48 of 59

Record #: 715-680



#### **Chapter 7 Retainer Agreement**

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter7 bankruptcy under the following terms and conditions:

Attorney fees for the Chapter 7 bankruptcy are \$ 3 Flat Fee: We quoted you a flat fee: no ups or extras except if something else happens, see #2. The advantage to you is that you know what your cost is. We are pretty good at estimating work, so you are never over-charged, and will get a refund of payments if we don't earn our flat fee. You may ask instead to pay us at an hourly rate of up to \$350/hr. but we usually find that will cost you more. It's up to you. Payments become ours and are not held in trust for later billing. Payments before filing are applied to work done before filing. After filing in court we apply your payments only to costs advanced and work done after filing. Non-Payment before filing. We may close the case - I will be charged only for work done to date. Court Costs may be applied to fees if case is discontinued and I give permission to transfer court costs from Trust Account to pay fees. Fees after Filing of case in court: If you have not paid post-filing fees & costs already: after filing, we'll send you a written voluntary agreement to pay post filing fee and costs advanced We will not accept payment of unpaid balance after this case is filed, unless you want to agree to pay us, or the Court enters a fee order. Not Included in Fee: Missed court dates, amendments (\$100 minimum), audits, work on asset cases, examinations in addition to meeting of creditors, contested matters, motions, objections to discharge (up to \$350/hr minimum 8hrs in advance), adversary complaints, or other matters except the first meeting of creditors and reaffirmations.

This amount does NOT INCLUDE court filing fees of \$335, or costs for credit counseling or financial management classes. This fee is based on the anticipated amount of work required to complete my case, and upon the information I have provided to date. If any information is incomplete or incorrect, the advice or Chapter may have to change, and this fee may have to be adjusted. This fee includes all work in the representation of my normal Chapter 7, including preparation of my bankruptcy petition, schedules and other documents, first 341 meeting, reaffirmations, normal correspondence with my creditors and myself, but does NOT include excessive work caused by you, missed 341 meetings, reopening the case, amendments to schedules, work on audits or asset cases, objections to exemptions, conversion to another chapter, evidentiary hearings, other contested matters or motions, or adversary proceedings, because these cannot be predicted in setting a flat fee. For work done on these matters, we bill between \$275/hr and \$450/hr for attorney time, based on the attorney doing the work, and \$85 to \$125/hr paralegal time. I agree that more than one attorney and paralegal will work on my case.

Fees are "flat fees" and "advance payment retainers" for pre-filing work, become property of this firm on payment, and are deposited into the firm's operating account. So do other payments. If this contract is terminated by either party prior to the filing of the case, the firm will refund unearned fees based on the above rates with an accounting, and on request, submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

I understand that bankruptcy laws only allow me to protect a certain amount of my property, and if I have any unprotected property, I understand my Chapter 7 Trustee can sell it if I do not or cannot buy out the Trustee's interest and that the U.S. Trustee may object to my filing a Chapter 7 if they believe I have excess income and should be filing a Chapter 13.

I agree to fully cooperate with my attorneys and provide all information requested at any point during the case. I understand that if I do not fully cooperate or provide complete and accurate information, my attorneys may withdraw from representation of me, with the permission of the Court.

If I have secured debts that I wish to retain (mortgages, financed vehicles or other financed property) that I may be required to sign a reaffirmation agreement with the creditor in order to keep the property, and I must remain current on my payments. Many mortgage and car companies refuse to reaffirm the debt but we have found that if you keep up your payments you keep the property anyway.

Debts not discharged if they not paid in full: student loans; educational debts & tuition; most tax debts: unfiled, trust fund or late filed tax; undisclosed debts; support/maintenance debts; fines, debts incurred by fraud, or after the case is filed, future condo/HOA dues,or debts listed in your red or green folder as usually not discharged, or found non-dischargeable by a Judge.

Representation limited to Bankruptcy Court We don't represent you in state court, or loan modifications or similar matters.

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition.

I understand that if I fail to take my financial management class after filing but before discharge, my case may be closed without a discharge, and I will be required to pay fees and costs to have it reopened. I have received the 11U.S.C § 527(a) disclosures.

(Joint Debtor) Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 160620

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 49 of 59

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Mary Teresa Rzewuski / Debtor Bankruptcy Docket #:

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 08/29/2016 /s/ Mary Teresa Rzewuski

Mary Teresa Rzewuski

X Date & Sign

Record # 715680 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

#### UNITED STATES BANKRUPTCY COURT

# NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

Record # 715680 B 201A (Form 201A) (11/11) Page 1 of 2

# Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main \_\_Document \_\_Page 51 of 59

Form B 201A, Notice to Consumer Debtor(s)

In re Mary Teresa Rzewuski / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 08/29/2016 | 15/ Waly Telesa Rzewuski |  |
|-------------------|--------------------------|--|
|                   | Mary Teresa Rzewuski     |  |
| Dated: 08/31/2016 | /s/ Wylie W Mok          |  |
|                   | Attorney: Wylie W Mok    |  |

# Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 52 of 59

| Debto  | or 1 <u>Mar</u>   |  | Teresa<br>Middle Name  | Rzewuski<br>Last Name   | Case Number  | r (if known)  |          |
|--------|---|--|--|---|--|---|----------|
| Pai    | rt 6:   | Answer These Questi                    | ons for Reporting Purpo  |   |  |   |          |
|        |   | The second second                      |  |   |  |   |          |
| 16.    | What kir  | nd of debts do<br>ve?                  | as fincurre  | debts primarily consumer<br>ed by an individual primarily for<br>o to line 16b.<br>Go to line 17. | a personal, family, or househol  | ld purpose."  |          |
|        |   |  | money for  | debts primarily business d<br>a business or investment or thr<br>o to line 16c,                   | <b>lebts?</b> Business debts are deleading to the busing the operation of the busing the busing the busing the busing the busing the busing the busing the busing the business are deleaded to business and business are deleaded to business are deleaded | bts that you incurred to obtain ness or investment.   |          |
|        |   |  |  | Go to line 17.  |  |   |          |
|        |   |  | 16c. State the ty  | ype of debts you owe that are n   | ot consumer debts or business  | s debts.  |          |
|        | Are you<br>Chapter  | filing under<br>7?                     | ☐ No. Iam  | not filing under Chapter 7. Go t  | to line 18.  |   |          |
| ,<br>i | Do you e<br>any exen<br>excluded<br>administ<br>are paid t<br>available | estimate that after<br>mpt property is | admir  |   | estimate that after any exempt<br>at funds will be available to disti  | property is excluded and ribute to unsecured creditors?   |          |
| 2      |   | ny creditors do<br>πate that you       | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999                      | □ 5,0   | 000-5,000<br>001-10,000<br>,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000  |          |
| •      |   | ch do you<br>your assets to<br>?       | \$0-\$50,000<br>\$50,001-\$10<br>\$100,001-\$:                   | 00,000  | ,000,001-\$10 million<br>0,000,001-\$50 million<br>0,000,001-\$100 million<br>00,000,001-\$500 million   | ☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion | ATTEMENT |
| E      |   | ch do you<br>your liabilities          | □ \$0-\$50,000 ■ \$50,001-\$10 □ \$100,001-\$5 □ \$500,001-\$1   | □\$1,<br>00,000 □\$10<br>500,000 □\$50  | ,000,001-\$10 million<br>0,000,001-\$50 million<br>0,000,001-\$100 million<br>00,000,001-\$500 million   | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion  More than \$50 billion    | 2000000  |
| Part   | 7: Sig  | gn Below                               |  |   |  | La more and the emeri   |          |
| or yo  | ou<br>  | e e e e e e e e e e e e e e e e e e e  | I have examined to correct.                                      | his petition, and I declare under   | r penalty of perjury that the info   | ormation provided is true and   |          |
|        |   |  | If I have chosen to<br>of title 11, United S<br>under Chapter 7. | o file under Chapter 7, I am awa<br>States Code. I understand the r                               | are that I may proceed, if eligible<br>relief available under each chap  | le, under Chapter 7, 11,12, or 13<br>pter, and I choose to proceed  |          |
|        |   |  | If no attorney repre<br>this document, I ha                      | esents me and I did not pay or a<br>ave obtained and read the notic                               | agree to pay someone who is r<br>se required by 11 U.S.C. § 342(   | not an attorney to help me fill out<br>(b).   |          |
| *      | other course<br>Page 1920   | en de Lanton<br>Galorie e Pro-         | I request relief in a  | accordance with the chapter of t  | itle 11, United States Code, sp  | pecified in this petition.  |          |
|        |   |  | with a pankiupicy (  | ng a false statement, concealing<br>case can result in fines up to \$2<br>1341, 1519, and 3571.   | g property, or obtaining money<br>250,000, or imprisonment for up  | or property by fraud in connection p to 20 years, or both.  |          |
|        |   |  | Signature of I   | Cew Ufler   |  | (Date of  |          |
|        |   |  | Executed on  | 8 29 /2016<br>MM / DD / YYYY  | _  | ture of Debtor 2  ited on  MM / DD / YYYY   |          |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 53 of 59

| Debtor 1           | Mary                 | Teresa                            | Rzewuski   | *** |                    |
|--------------------|----------------------|-----------------------------------|------------|-----|--------------------|
|                    | First Name           | Middle Name                       | Last Name  |     |                    |
| Debtor 2           |                      |                                   |            |     |                    |
| Spouse, if filing) | First Name           | Middle Name                       | Last Name  |     |                    |
| Inited States      | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS   |     |                    |
| ase Number         | -                    |                                   | (State)    |     |                    |
| f known)           |                      |                                   | <b>-</b> . |     | Check if this is a |

## Official Form 106 Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |
|---|---|
| Did you pay or agree to pay someone who is NOT an attorney to             | o help you fill out bankruptcy forms?   |
| Yes. Name of Person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|   |   |
| Under penalty of perjury, I declare that I have read the summary correct. | and schedules filed with this declaration and that they are true and                          |
| * Preco ceffei Signature of Debtor 1                                      | Signature of Debtor 2   |
| Date : 8 29 /2016<br>MM / DD / YYYY                                       | Date<br>MM / DD / YYYY  |
|   |   |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 54 of 59

| Debtor 1 | Mary                                       | Teresa  | Rzewuski                         | Case Number (if known)   |  |
|----------|--|---|----------------------------------|--|--|
|          | First Name                                 | Middle Name   | Last Name                        |  |  |
|          | No None of the ob                          | pove applies. Go to Part 12.                            |                                  |  | SECONDO CONTRACTOR DE LA CONTRACTOR DE L |
|          |  |   | la balancean control of          |  |  |
| u        | res. Check all that                        | t apply above and fill in the detail                    | is delow for each business.      |  |  |
| 28 Wit   |  |   |                                  |  |  |
| ins      | nin 2 years before<br>titutions, creditors | you filed for bankruptcy, did yo<br>, or other parties. | ou give a financial statement to | anyone about your business? Include all financial                                      |  |
|          | No.  |   |                                  |  |  |
|          | Yes. Fill in the deta                      | ails.   |                                  |  |  |
|          |  | Date Issue  | e <b>d</b>                       |  |  |
| Part 12  | Sign Below                                 | **************************************                  | dan sa agas an da.               |  |  |
|          |  |   |                                  |  |  |
| l hav    | e read the answers                         | on this Statement of Financial                          | Affairs and any attachments,     | and I declare under penalty of perjury that the  |  |
| in co    | nnection with a ba                         | nkruptcy case can result in fine                        | 3 a taise statement, concealing  | property, or obtaining money or property by fraud<br>nent for up to 20 years, or both. |  |
| 18 U.    | S.C. §§ 152, 1341,                         | 1519, and 3571.   | or any section of amphicon       | ion for up to 20 years, or notifi.   |  |
|          |  | $\cap$  |                                  |  |  |
| 4.0      | #\Dea                                      | orate.  |                                  |  |  |
| . S. X.  | Signature of Debto                         |   | ×                                |  |  |
|          | oignature of Debto                         | f I   | Signature of D                   | ebtor 2  |  |
|          | S 29                                       | )<br>/2016  |                                  |  |  |
|          | MM / DD /                                  | 72010<br>YYYY   | Date                             | DD / YYYY  |  |
|          |  |   |                                  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |  |
| Did y    | ou attach additions                        | al pages to Your Statement of F                         | inancial Affairs for Individuals | Filing for Bankruptcy (Official Form 107)?   |  |
| - Person |  |   |                                  | Timing for Bankruptey (Official Form 107)?   |  |
| N        |  |   |                                  |  |  |
| ĽΥ       | es   |   |                                  |  |  |
| Did ye   | ou pay or agree to                         | pay someone who is not an att                           | orney to help you fill out bank  | uptcy forms?   |  |
| N        | 0  |   |                                  |  |  |
| □ Y      | es. Name of perso                          | on  |                                  | . Attach the Bankruptcy Petition Preparer's Notice,                                    |  |
|          | -  |   |                                  | Declaration, and Signature (Official Form  | 119).  |
|          |  |   |                                  | • ,  | •  |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 55 of 59

Case Number (if known) Teresa Debtor 1 Mary Middle Name

| Part 2: List Your Unexpired Personal Property Lease:   | s  |                            |
|--|--|----------------------------|
| For any unexpired personal property lease that you lister fill in the information below. Do not list real estate leases ended. You may assume an unexpired personal property   | . Unexpired leases are leases that are still in effect; the  | lease period has not yet   |
| and the first state of the stat | rease ii tile trustee does not assume it. 11 U.S.C. § 365(   | (p)(2).                    |
| Describe your unexpired personal property leases   |  | Will the lease be assumed? |
| Lessor's name:   |  | ☐ No                       |
| Description of leased property:  |  | Yes                        |
| Lessor's name:   |  | ☐ No                       |
| Description of leased property:  |  | Yes                        |
| Lessor's name:   | Market and the second second second and the second and the second | ☐ No                       |
| Description of leased property:  |  | Yes                        |
| Lessor's name:   |  | No                         |
| Description of leased property:  |  | □Yes                       |
| Lessor's name:   | NC COLORS COMMENTAL DE LOS COLORS E EXCELTES SECURIOS COMPANIONES DE MONTO COMPANION DE LOS COMPANIONES DE L | □No                        |
| Description of leased property:  |  | □Yes                       |
| Lessor's name:   | ANNER DE TILO PERSON TILO PER LE PERSON DE LE CONTRACTOR DE L'ANNER DE   | □No                        |
| Description of leased property:  |  | □Yes                       |
| Lessor's name:   |  | □ No                       |
| Description of leased property:  |  | ☐ Yes                      |
| Part&: Sign Below  | STATE STATE OF THE PROPERTY OF |                            |
| der penalty of perjury, I declare that I have indicated my i   | ntention about any property of my estate that secures a  | debt and any               |
| rsonal property that is subject to an unexpired lease.   |  |                            |
| Kæveder"   | *  |                            |
| Signature of Debtor 1  Date Dated: 2/29/20  MM / DD / YYYY   | Signature of Debtor 2  Date  MM / DD / YYYY  | <del>-</del>               |

## Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 DISCLAIMERO ODEISTOIRS HARRETER OF THE AGREE

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment. 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case

| Dated: 6 /29 /2016 | ROCE OUR PETITION IS ACCURATEIN | X Date & Sign |
|--------------------|---------------------------------|---------------|
|                    | Mary Teresa Rzewuski            |               |

Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Page 57 of 59

# **UNITED STATES BANKRUPTCY COURT** NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re Mary Teresa Rzewuski / Debtor

Bankruptcy Docket #:

Judge:

## **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Mary Teresa Rzewuski

X Date & Sign

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

# Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 58 of 59

| Deb                                | otor 1          | Mary  | Teresa   | R                    | zewuski                  |                | Case Number (if known)     |                |            | * *  |
|------------------------------------|-----------------|---|--|----------------------|--------------------------|----------------|----------------------------|----------------|------------|--|
| *                                  | ٠.              | First Name  | Middle Name  | La                   | st Name                  |                | Case Number (II knowit)    | 7 3            |            |  |
| od someone concession and a second |                 |   |  |                      |                          |                | Column A<br>Debtor 1       | Colum<br>Debto | 2 or       |  |
|                                    |                 |   |  |                      |                          |                |                            | non-fil        | ing spouse |  |
| ž.                                 |                 | ployment comper                                     |  |                      |                          |                | \$0.00                     |                | \$0.00     | × - 1  |
|                                    | under           | the Social Securit                                  | t if you contend that the an<br>y Act. Instead, list it here:.                         | nount received w     | as a benefit             |                |                            |                |            |  |
|                                    | For y           | ou  |  | •••••                |                          |                |                            |                |            |  |
|                                    | Fог у           | our spouse  | •••••  |                      |                          |                |                            |                |            |  |
|                                    |                 |   |  |                      |                          |                |                            |                |            |  |
| 9.                                 | Pens<br>benef   | i <b>on or retirement i</b><br>fit under the Social | income. Do not include an<br>Security Act.   | y amount receive     | ed that was a            |                | \$1,923.34                 |                | 40.00      |  |
| 10.                                | incon           | ne from all other s                                 | ources not listed above.   | Specify the sour     | se and amount            |                | Ψ1,323.34                  |                | \$0.00     |  |
|                                    | Do no<br>as a v | ot include any bene<br>victim of a war crim         | ofits received under the Sc<br>ie, a crime against human<br>ist other sources on a sep | cial Security Act    | or payments received     |                |                            |                |            |  |
|                                    | 10a.            |   |  | arate page and t     | out the total on line 10 | c.             | \$0.00                     | ¢              | 0.00       |  |
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|                                    |                 |   | rent monthly income. Ad  | d linos 3 through    | 40.600                   |                | \$0.00                     |                | \$0.00     |  |
|                                    | colum           | n. Then add the to                                  | tal for Column A to the tot  | al for Column B.     | 10 for each              |                | \$1,923.34 +               |                | \$0.00 =   | \$1,923.34   |
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| Pa                                 | rt 2:           | Determine Wh  | ether the Means Test Appl  | : 4_ <b>V</b>        |                          |                |                            |                |            |  |
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| 1                                  | 2a.             | Copy your total cu                                  | nonthly income for the yerrent monthly income from                                     | ear. Follow these    | steps:                   |                | Convine of here            |                |            | · · · · · · · · · · · · · · · · · · ·  |
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| F                                  | ill in t        | the number of peor                                  | ole in your household.   |                      | 2                        | โ              |                            | •              |            |  |
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| - 1                                | o tina          | i a list of applicable                              | ncome for your state and se median income amounts                                      | an online using      | tha link ananiting in th |                | ••••••                     |                | 13.        | \$63,896.00  |
| ir                                 | nstruc          | tions for this form.                                | This list may also be avail  | able at the bankr    | uptcy clerk's office.    | e separate     |                            |                |            |  |
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Case 16-28085 Doc 1 Filed 08/31/16 Entered 08/31/16 16:50:44 Desc Main Document Page 59 of 59

Form B 201A, Notice to Consumer Debtor(s)

In re Mary Teresa Rzewuski / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

X Date & Sign

Wylie W Mok